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**Apr 26, 1999 8:00 am**  
**Secretary of State**

04-26-1999 90196 012 \*\*\*\*61.25

0027157

**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N96000000068**

1. Corporation Name

**HARVEST CHAPEL OF CORAL SPRINGS, INC.**

418731 - 90196 - 12

Principal Place of Business  
1901 CORAL RIDGE DR  
CORAL SPRINGS FL 33071  
US

Mailing Address  
1901 CORAL RIDGE DR  
CORAL SPRINGS FL 33071  
US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

12/27/1995

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number  
65-0646811

Applied For  
Not Applicable

City & State

City & State

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

Zip

Country

Zip

Country

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MACHADO, JOHN**  
2725 SW 108TH AVE  
MIRAMAR FL 33029

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOT E: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME **DP**  
STREET ADDRESS **MACHADO, JOHN**  
CITY-STATE-ZIP **9408 NW 38TH ST**  
**CORAL SPRINGS FL 33065**

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME **PD**  
1.3 STREET ADDRESS **STRADER, DOUGLAS J.**  
1.4 CITY-STATE-ZIP **992 NW 83 DRIVE**  
**CORAL SPRINGS, FL 33071**

TITLE ☒ DELETE  
NAME **DV**  
STREET ADDRESS **MCCLURG, TIM**  
CITY-STATE-ZIP **9408 NW 38TH ST**  
**CORAL SPRINGS FL 33065**

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME **VD**  
2.3 STREET ADDRESS **WHITLATCH, JAMES (DR)**  
2.4 CITY-STATE-ZIP **3790 NW 19 STREET**  
**COCONUT CREEK, FL 33066**

TITLE ☒ DELETE  
NAME **DS**  
STREET ADDRESS **HYLTON, RODNEY**  
CITY-STATE-ZIP **9408 NW 38TH ST**  
**CORAL SPRINGS FL 33065**

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME **ST/T**  
3.3 STREET ADDRESS **HOHN, WILLIAM**  
3.4 CITY-STATE-ZIP **9408 NW 38 STREET**  
**CORAL SPRINGS, FL 33065**

TITLE ☐ DELETE  
NAME **T**  
STREET ADDRESS **SEEGER, KEN**  
CITY-STATE-ZIP **2943 NW 31ST PL**  
**MARGATE FL 33063**

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME **T**  
4.3 STREET ADDRESS **MACHADO, JOHN**  
4.4 CITY-STATE-ZIP **2725 SW 180 AVENUE**  
**MIRAMAR, FL 33029**

TITLE ☐ DELETE  
NAME **T**  
STREET ADDRESS **RAMOS, LUIS**  
CITY-STATE-ZIP **6600 NW 20TH ST**  
**MARGATE FL 33063**

5.1 TITLE ☒ Change ☐ Addition  
5.2 NAME **T**  
5.3 STREET ADDRESS **LAMB, ROBERT**  
5.4 CITY-STATE-ZIP **12151 NW 35 STREET**  
**SUNRISE, FL 33323**

TITLE ☐ DELETE  
NAME **T**  
STREET ADDRESS **FUNK, BARRY**  
CITY-STATE-ZIP **7602 SUNFLOWER DRIVE**  
**MARGATE, FL 33063**

6.1 TITLE ☒ Change ☐ Addition  
6.2 NAME **T**  
6.3 STREET ADDRESS **FUNK, BARRY**  
6.4 CITY-STATE-ZIP **7602 SUNFLOWER DRIVE**  
**MARGATE, FL 33063**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* REQUIRED

4-30-99

Date

Daytime Phone #

CR2E037 (1/98)