

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 01, 2006  
Secretary of State**

DOCUMENT# N96000004017

Entity Name: HARVEST FIELDS CHRISTIAN CENTER, INC.

**Current Principal Place of Business:**

1401 LAKE DRIVE  
CANTONMENT, FL 32505 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 463  
GONZALEZ, FL 32560 US

**New Mailing Address:**

FEI Number: 62-1647680      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

ISBELL, DELIA  
1401 LAKE DR.  
CANTONMENT, FL 32533 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: LEWIS, FRANK  
Address: 33763 LOST RIVER RD.  
City-St-Zip: SEMINOLE, AL 32574

Title: D ( ) Delete  
Name: HAMILTON, DEBBIE  
Address: 1714 W LAKEVIEW  
City-St-Zip: PENSACOLA, FL 32501

Title: V ( ) Delete  
Name: WINGATE, PATRICIA  
Address: 1110 VANKIRK AV  
City-St-Zip: PENSACOLA, FL 32503

Title: D ( ) Delete  
Name: CARISTI, ROBERT  
Address: 33759 LOST RIVER RD  
City-St-Zip: SEMINOLE, AL 32574

Title: P ( ) Delete  
Name: ISBELL, RANDALL  
Address: 1401 LAKE DR.  
City-St-Zip: CANTONMENT, FL 32533

Title: T ( ) Delete  
Name: WINPIGLER, MELISSA  
Address: 416 VERA ST  
City-St-Zip: PENSACOLA, FL 32514

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: LEWIS, CUPIDEAN  
Address: 33763 LOST RIVER RD.  
City-St-Zip: SEMINOLE, AL 32574

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: ISBELL, DELIA A  
Address: 1401 LAKE DRIVE  
City-St-Zip: PENSACOLA, FL 32533

Title: D (X) Change ( ) Addition  
Name: BROWN, MARILYN  
Address: 1400 LEMHURST ROAD  
City-St-Zip: PENSACOLA, FL 32507

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DELIA A. ISBELL

V

05/01/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date