

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005409

FILED  
Apr 25, 2005  
Secretary of State

**Entity Name:** HARVEST CHRISTIAN CENTER OF NAPLES, INC.

**Current Principal Place of Business:**

3111 66TH ST. SW  
NAPLES, FL 34105

**New Principal Place of Business:**

**Current Mailing Address:**

3111 66TH ST. SW  
NAPLES, FL 34105

**New Mailing Address:**

**FEI Number:** 59-3430358

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KRAUSS, FREDERICK  
311 66TH ST. SW  
NAPLES, FL 34105 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: KRAUSS, FREDERICK W  
Address: 3111 66TH ST. SW  
City-St-Zip: NAPLES, FL 34105

Title: D ( ) Delete  
Name: KRAUSS, DORA A  
Address: 3111 66TH ST. SW  
City-St-Zip: NAPLES, FL 34105

Title: D ( ) Delete  
Name: OLSEN, TENNEY  
Address: 6308 MALLARD TRACE DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

Title: D ( ) Delete  
Name: MOORE, MICHAEL  
Address: 340 TAVANIER DR  
City-St-Zip: OLDSMAR, FL 34677

Title: D ( ) Delete  
Name: WEISS, JON A  
Address: 2650 OUTRIGGER LANE  
City-St-Zip: NAPLES, FL 34105

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

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

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

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

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 Section 119.07(3)(i), 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: FREDERICK KRAUSS

PRES

04/25/2005

Electronic Signature of Signing Officer or Director

Date