

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005560

FILED
Feb 07, 2005
Secretary of State

Entity Name: HARVEST ASSEMBLY OF GOD, INC.

Current Principal Place of Business:

2120 AIRPORT ROAD
LAKELAND, FL 33811

New Principal Place of Business:

Current Mailing Address:

2120 AIRPORT ROAD
LAKELAND, FL 33811

New Mailing Address:

FEI Number: 59-2992592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARROD, JOHN O
604 W. CHERRY ST.
PLANT CITY, FL 33566 US

Name and Address of New Registered Agent:

ALLEN, DALE O
604 W. CHERRY ST.
PLANT CITY, FL 33566 US

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: DALE ALLEN

02/07/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JONES, RAY
Address: 416 KERNEYWOOD ST
City-St-Zip: LAKELAND, FL 33803 US

Title: D () Delete
Name: HARGROVE, NAT
Address: 3729 HILEMAN DR N
City-St-Zip: LAKELAND, FL 33810 US

Title: D () Delete
Name: CONNELL, DERRELL
Address: 6220 ROSS CREEK RD.
City-St-Zip: LAKELAND, FL 33811 US

Title: D () Delete
Name: MICHAEL, MOCK
Address: 1872 MAHAFFEY CIR
City-St-Zip: LAKELAND, FL 33811 US

Title: D () Delete
Name: ALLEN, DALE
Address: 1335 SUTTON ROAD
City-St-Zip: LAKELAND, FL 33809 US

Title: P () Delete
Name: CONLEY, KEITH R PASTOR
Address: 4425 GALLOWAY LANE
City-St-Zip: LAKELAND, FL 33810 US

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:

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: RICK MYERS

ADMI

02/07/2005

Electronic Signature of Signing Officer or Director

Date