

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005560

FILED
Mar 30, 2009
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:

P O BOX 2069
LAKELAND, FL 33806

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:

CONLEY, KEITH R
4428 GALLOWAY LANE
LAKELAND, FL 33810 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: T () Delete
Name: ALLEN, NATHAN D
Address: 1335 SUTTON ROAD
City-St-Zip: LAKELAND, FL 33810 US

Title: S () Delete
Name: MALDONADO, GONZALO
Address: 3305 FIDDLELEA F WAY
City-St-Zip: LAKELAND, FL 33811 US

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

Title: D () Delete
Name: DUNSFORD, MARK D
Address: 6155 BETHLEHEM RD
City-St-Zip: MULBERRY, FL 33860 US

Title: D () Delete
Name: BERGGREN, DOUGLAS J
Address: 4828 TONI AVE
City-St-Zip: LAKELAND, FL 33812 US

Title: P () Delete
Name: CONLEY, KEITH R PASTOR
Address: 4428 GALLOWAY LANE
City-St-Zip: LAKELAND, FL 33810 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: ALLEN, NATHAN D
Address: 4621 BURGUNDY PL
City-St-Zip: LAKELAND, FL 33813 US

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: D (X) Change () Addition
Name: RAMOS, MARIO
Address: 358 HOLLY RIDGE ROAD
City-St-Zip: WINTER HAVEN, FL 33880 US

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

I hereby certify that the information supplied with this filing does not qualify 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: KEITH R CONLEY

P

03/30/2009

Electronic Signature of Signing Officer or Director

Date