# 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Aug 18, 2009**
**Secretary of State**

DOCUMENT# N97000005560

**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: | MALDONADO, GONZALO | |
| Address: | 3305 FIDDLELEAF WAY | |
| City-St-Zip: | LAKELAND, FL 33811 US | |
| Title: | S | ( ) Delete |
| Name: | JONES, RAYMOND H | |
| Address: | 416 KERNEYWOOD STREET | |
| City-St-Zip: | LAKELAND, FL 33803 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: | RAMOS, MARIO | |
| Address: | 358 HOLLY RIDGE ROAD | |
| City-St-Zip: | WINTER HAVEN, FL 33880 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: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | S | (X) Change ( ) Addition |
| Name: | DUNSFORD, MARK D | |
| Address: | 6155 BETHLEHEM RD | |
| City-St-Zip: | MULBERRY, FL 33860 US | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | D | (X) Change ( ) Addition |
| Name: | HOWELL, STEVEN | |
| Address: | 6045 BETHLEHEM RD | |
| City-St-Zip: | MULBERRY, FL 33860 US | |
| 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 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 08/18/2009

Electronic Signature of Signing Officer or Director — Date