

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000643

Entity Name: HARVEST CHRISTIAN ACADEMY, INC.

FILED
Jan 29, 2004
Secretary of State

Current Principal Place of Business:

3800 NORTH NEBRASKA AVENUE
TAMPA, FL 33606

New Principal Place of Business:

3810 NORTH 40TH STREET
TAMPA, FL 33610

Current Mailing Address:

3800 NORTH NEBRASKA AVENUE
TAMPA, FL 33606

New Mailing Address:

3810 N. 40TH STREET
TAMPA, FL 33610

FEI Number: 59-3587665

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, SEAN
810 STRATFORD AVE
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

WOODY, JAMAAL
1718 E. 7TH AVE
201
TAMPA, FL 33605 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: JAMAAL WOODY

01/29/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEWIS, MICHAEL
Address: 3800 N. NEBRASKA AVE.
City-St-Zip: TAMPA, FL 33606

Title: SD () Delete
Name: CARTER, PAT
Address: 3800 N NEBRASKA AVENUE
City-St-Zip: TAMPA, FL 33603

Title: TD () Delete
Name: MONTGOMERY, KIMBERLY
Address: 810 STRATFORD AVENUE
City-St-Zip: TAMPA, FL 33603

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:

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: MICHEAL LEWIS

PD

01/29/2004

Electronic Signature of Signing Officer or Director

Date