

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N98000000855

FILED  
Apr 29, 2003  
Secretary of State

**Entity Name:** FAITH SEED MINISTRIES CHURCH OF THE HARVEST, INC.

**Current Principal Place of Business:**

17410 SW 108 AVE  
PERRINE, FL 33157

**New Principal Place of Business:**

18627 S.W. 107 AVE  
PERRINE, FL 33157

**Current Mailing Address:**

17410 SW 108 AVE  
PERRINE, FL 33157

**New Mailing Address:**

**FEI Number:** 65-0815334

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JBA ACCOUNTING INC  
9900 SW 168 ST #9  
MIAMI, FL 33157 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: EVANS, ADAM JR  
Address: 17410 SW 108 AVE  
City-St-Zip: PERRINE, FL 33157

Title: T ( ) Delete  
Name: WALKER, KIMBERLY L  
Address: 17410 SW 108 AVE  
City-St-Zip: PERRINE, FL 33157

Title: T ( ) Delete  
Name: WALKER, ANGELA M  
Address: 17410 SW 108 AVE  
City-St-Zip: PERRINE, FL 33157

Title: T ( ) Delete  
Name: WALKER, KAREN  
Address: 17410 SW 108 AVE  
City-St-Zip: PERRINE, FL 33157

**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: T (X) Change ( ) Addition  
Name: REESE, KAREN  
Address: 17410 SW 108 AVE  
City-St-Zip: PERRINE, FL 33157

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: ADAM EVANS JR.

D

04/29/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date