2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N98000003118

1. Entity Name

VISION OF HARVEST MINISTRIES, INC.



FILED Feb 02, 2004 08:00 AM Secretary of State

Principal Place of Business

SIGNATURE:

O S MADEINICAT DAVID OTREED

3684 NORTHWEST 32ND STREET LAUDERDALE LAKES, FL 33309

Mailing Address

3684 NORTHWEST 32ND STREET LAUDERDALE LAKES, FL 33309



01282004 No Chg-NP

CR2E037 (10/03)

4. FEI Number 65-0844716 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

MORTON, SR., ANTHONY L PASTOR 3684 NORTHWEST 32ND STREET LAUDERDALE LAKES, FL 33309

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8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE.	Signature, typed or printed name of registered agent and title 8	applicable. (NOTE Registered	Agent signature	required when retratating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2004	Election Campaign Financ Trust Fund Contribution.	ing 🖺	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZP	PD MORTON, SR., ANTHONY L 3684 NORTHWEST 32ND STREET LAUDERDALE LAKES, FL 33309		-		·
TITLE HAME STREET ADDRESS CITY-ST-ZP	VPD MORTON, CONNIE L 3684 NORTHWEST 32ND STREET LAUDERDALE LAKES, FL 33309		<u>.</u>		U00000028693 02/04/04-80035-023 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MURPHY, SONJA 5215 N.W. 16TH COURT LAUDERHILL, FL 33313			DO	NOT WRITE
HILE NAME STREET ADDRESS CITY-ST-ZP	TD GARVIN, CANDIDA 5613 N.W. 16TH STREET LAUDERHILL, FL 33313			IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORTON, ANTHONY L JR 3684 NORTHWEST 32ND STREET LAUDERDALE LAKES, FL 33309				
TITLE HAME STREET ADORESS CITY-ST-ZIP	D WILLIAMS, CHARMAINE 3160 N.W. 5TH COURT LAUDERHILL, FL 33311				
12. I hereby certify that the information supplied with this filling does not qualify 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 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 regulated by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					

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