

2000 UNIFORM BUSINESS REPORT (UBR)

0074163

DOCUMENT # N99000003373

1. Entity Name

FINAL-HARVEST MINISTRIES INTERNATIONAL, INC.

APPROVED
AND
FILED

00 MAR -2 AM 9:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

5421 WATSON RD.
RIVERVIEW FL 33569

30-N. RING AVE., STE. 400
TARPON SPRINGS FL 34689-4904

2. Principal Place of Business

5421 WATSON RD.

3. Mailing Address

23 E. Tarpon Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

RIVERVIEW, FL

City & State

Tarpon Springs, FL

4. FEI Number

59-3581284

Applied For

Not Applicable

Zip

33569

Country

US

Zip

34689

Country

US

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KLIMIS, GEORGE N
30-N. RING AVE., STE. 400
TARPON SPRINGS FL 34689

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

23 E. Tarpon Ave

City

Tarpon Springs

FL

Zip Code

34689

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/7/00

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME JOHNSON, GERALD
STREET ADDRESS 5421 WATSON RD.
CITY-ST-ZIP RIVERVIEW FL 33569

TITLE ☒ Change ☐ Addition
NAME Johnson, Gerald J., Jr.
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME CASTELLUCCI, ERIC D
STREET ADDRESS 9107 WOODRIDGE RUN DR.
CITY-ST-ZIP TAMPA FL 33647

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 400003161034-4
CITY-ST-ZIP -03/07/00-01034-005

TITLE D ☐ Delete
NAME NOTO, JAMES M
STREET ADDRESS 4366 DEWEY DR.
CITY-ST-ZIP NEW PORT RICHEY FL 34652

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS *****61.25
CITY-ST-ZIP

TITLE P ☐ Delete
NAME JOHNSON, GEORGE J SR.
STREET ADDRESS 5421 WATSON RD.
CITY-ST-ZIP RIVERVIEW FL 33569

TITLE ☒ Change ☐ Addition
NAME Johnson, Gerald J., Sr.
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME CASTELLUCCI, SHANNA J
STREET ADDRESS 9107 WOODRIDGE RUN DR.
CITY-ST-ZIP TAMPA FL 33647

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME JOHNSON, NORMA D
STREET ADDRESS 5421 WATSON RD.
CITY-ST-ZIP RIVERVIEW FL 33569

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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 required 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.

SIGNATURE:

Gerald J. Johnson, Jr. GERALD J. JOHNSON, JR. 1/19/00 (813) 655-7423
DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)