

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007058

FILED
Apr 30, 2008
Secretary of State

Entity Name: NEW HARVEST CATHEDRAL INC.

Current Principal Place of Business:

6140 NW 11TH STREET
SUNRISE, FL 33313 US

New Principal Place of Business:

Current Mailing Address:

6140 NW 11TH STREET
SUNRISE, FL 33313 US

New Mailing Address:

FEI Number: 65-0952640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARDS, FILBERT
5711 NW 15TH ST., #1
LAUDERHILL, FL 33313 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: PD () Delete
Name: RICHARDS, FILBERT
Address: 5711 NW 15TH ST., #1
City-St-Zip: LAUDERHILL, FL 33313

Title: VD () Delete
Name: BENNET, GEORGE
Address: 3200 NW 41ST ST.
City-St-Zip: LAUDERDALE LAKES, FL 33309

Title: TD () Delete
Name: ALLEN, EULA
Address: 8161 SW 4TH PLACE
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: DS () Delete
Name: RICHARDS, SONIA
Address: 5711 BW 15TH ST., #1
City-St-Zip: LAUDERHILL, FL 33313

Title: D () Delete
Name: JOHNSON, ISAIAH
Address: 6140 NW 11TH STREET
City-St-Zip: SUNRISE, FL 33313

Title: () Delete
Name:
Address:
City-St-Zip:

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: MILLER, R WAYNE DR
Address: 803 HOWARD PARKWAY
City-St-Zip: MYRTLE BEACH, SC 29577

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: FILBERT RICHARDS

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date