# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Mar 26, 2008**
**Secretary of State**

DOCUMENT# N99000007335

**Entity Name:** HARVEST CHURCH WORSHIP CENTER, INC.

**Current Principal Place of Business:**

2612 N POWERS DRIVE
ORLANDO, FL 32818

**New Principal Place of Business:**

**Current Mailing Address:**

2627 COVENTRY LANE
OCOEE, FL 34761

**New Mailing Address:**

**FEI Number: 59-3615565** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

PETERS, JAMES
2627 COVENTRY LANE
OCOEE, FL 34761 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: | P | ( ) Delete |
| Name: | PETERS, JAMES | |
| Address: | 2627 COVENTRY LANE | |
| City-St-Zip: | OCOEE, FL 34761 | |
| Title: | D | ( ) Delete |
| Name: | PETERS, GARY | |
| Address: | 2627 COVENTRY LANE | |
| City-St-Zip: | OCOEE, FL 34761 | |
| Title: | D | ( ) Delete |
| Name: | BAKER, RANDOLPH | |
| Address: | 2627 COVENTRY LANE | |
| City-St-Zip: | OCOEE, FL 34761 | |
| Title: | T | ( ) Delete |
| Name: | HERMAN, BRYAN | |
| Address: | 6324 LANRELWOOD CT | |
| City-St-Zip: | OCOEE, FL 34761 | |
| Title: | D | ( ) Delete |
| Name: | ROSE, HUBERT | |
| Address: | 7215 WOODHILL PARK DR #214 | |
| City-St-Zip: | ORLANDO, FL 32818 | |
| Title: | D | ( ) Delete |
| Name: | HELEN, MURPHY | |
| Address: | 2601 RENEGRADE DR #201 | |
| City-St-Zip: | ORLANDO, FL 32818 | |

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

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: JAMES PETERS BISH 03/26/2008

Electronic Signature of Signing Officer or Director — Date