

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000007412

FILED  
May 01, 2003  
Secretary of State

Entity Name: HARVEST TIME CHRISTIAN ACADEMY, INC.

**Current Principal Place of Business:**

6337 S.W. 27TH STREET  
MIRAMAR, FL 33032

**New Principal Place of Business:**

**Current Mailing Address:**

120 N. W. 191ST STREET  
MIAMI, FL 33169

**New Mailing Address:**

FEI Number: 65-0970086

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPENCER, ARLINE J  
120NW 191 STREET  
MIAMI, FL 33169 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: BALLESTEROS, FRANCISCO R  
Address: 1240 NE 206 STREET  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: D ( ) Delete  
Name: JOHNSON, RHONDA C  
Address: 1606 SNYDER COURT  
City-St-Zip: MARION, IN 46952

Title: D ( ) Delete  
Name: WOODHOUSE, FLORENCE R  
Address: 1033 DULCIE AVENUE  
City-St-Zip: VIRGINA BEACH, VA 23455

Title: D ( ) Delete  
Name: JOHNSON, BRUCE A  
Address: 1606 SNYDER COURT  
City-St-Zip: MARION, IN 46952

Title: D ( ) Delete  
Name: SULLIVAN, THERESA J  
Address: 18943 NW 56TH COURT  
City-St-Zip: MIAMI, FL 33055

**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:

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: FRANCISCO BALLESTEROS

D

05/01/2003

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date