

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000032872

FILED
Jan 15, 2009
Secretary of State

Entity Name: HARVEST HOUSE GOVERNMENT SERVICES INC.

Current Principal Place of Business:

2101 S. WAVERLY PLACE, STE. 300
MELBOURNE, FL 32901

New Principal Place of Business:

3935 HEILD ROAD NW
PALM BAY, FL 32907

Current Mailing Address:

2101 S. WAVERLY PLACE, STE. 300
MELBOURNE, FL 32901

New Mailing Address:

3935 HEILD ROAD NW
PALM BAY, FL 32907

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD., STE. 101
TALLAHASSEE, FL 323012960 US

Name and Address of New Registered Agent:

RHONDA L. HINDS & ASSOCIATES
595 N. COURTENAY PKWY
SUITE 202
MERRITT ISLAND, FL 32953 US

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: RHONDA L. HINDS

01/15/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: RICHARDS, WILLIAM
Address: 2101 S. WAVERLY PLACE, STE. 300
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: RICHARDS, WILLIAM
Address: 3935 HEILD ROAD NW
City-St-Zip: PALM BAY, FL 32907

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DR. WILLIAM R. RICHARDS

OWNE

01/15/2009

Electronic Signature of Signing Officer or Director

Date