

2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Aug 10, 2011
Secretary of State**

DOCUMENT# N37058

Entity Name: LABORERS AND HARVESTORS MINISTRIES, INC.

Current Principal Place of Business:

1005 N. ROSE STREET
P.O. BOX 775
LAKE HAMILTON, FL 338510775

New Principal Place of Business:

1005 N. ROSE STREET
LAKE HAMILTON, FL 338510775

Current Mailing Address:

1005 N. ROSE STREET
P.O. BOX 775
LAKE HAMILTON, FL 338510775

New Mailing Address:

1034 N ANDERSON AVE
LAKELAND, FL 33805

FEI Number: 59-2914896 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILSON, EMORY
1034 N ANDERSON AVENUE
LAKELAND, FL 33805 US

Name and Address of New Registered Agent:

WILSON, EMORY
1034 N ANDERSON AVE
LAKELAND, FL 33805 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: EMORY WILSON 08/10/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P
Name: WILSON, EMORY
Address: 1034 N. ANDERSON AVE
City-St-Zip: LAKELAND, FL 33805

Title: VP
Name: WILSON, CLARISSA
Address: 1034 N. ANDERSON AVE
City-St-Zip: LAKELAND, FL 33805

Title: T
Name: TAYLOR, DELORIS
Address: 6876 BORDEAUX BLVD.
City-St-Zip: LAKELAND, FL 33811

Title: S
Name: BROWN, TIMETHIA
Address: 6876 BORDEAUX BLVD.
City-St-Zip: LAKELAND, FL 33811

I hereby 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 all other like empowered.

SIGNATURE: DELORIS TAYLOR T 08/10/2011

Electronic Signature of Signing Officer or Director Date