

**2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N08000008553

**Entity Name:** GOD'S HARVESTERS MINISTRY, INC.

**Current Principal Place of Business:**

1325 DOUGLAS AVE.  
SANFORD, FL 32771

**Current Mailing Address:**

1325 DOUGLAS AVE  
SANFORD, FL 32771 US

**FEI Number:** 38-3789435

**Certificate of Status Desired:** No

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

LEWIS, CHARLIE S JR.  
2823 HIGHLAND VIEW CIRCLE  
CLERMONT, FL 34711 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:** CHARLIE LEWIS JR

06/18/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LEWIS, CHARLIE S JR.  
Address        2823 HIGHLAND VIEW CIRCLE  
City-State-Zip: CLERMONT FL 34711

Title            VP  
Name            WRIGHT, GLORIA  
Address        111 HUGHES AVE  
City-State-Zip: SANFORD FL 32771

Title            TREASURER  
Name            ALEXANDER, ANGELA  
Address        602 S. LOCUST AVE.  
City-State-Zip: SANFORD FL 32771

Title            ELDER  
Name            WARREN, LINDA  
Address        114 ANDERSON AVE.  
City-State-Zip: SANFORD FL 32771

Title            SECRETARY  
Name            LEWIS BROWN, BESSIE LARITA  
Address        2823 HIGHLAND VIEW CIRCLE  
City-State-Zip: CLERMONT FL 34711

Title            ASST. TREASURER  
Name            BROWN, RUTH  
Address        130 INTEGRA VILLAGE TR.  
City-State-Zip: SANFORD FL 32771

Title            CHAIRMAN  
Name            ALEXANDER, CAMERON  
Address        1325 DOUGLAS AVE.  
City-State-Zip: SANFORD FL 32771

*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:** CHARLIE LEWIS, JR.

PRESIDENT

06/18/2019

Electronic Signature of Signing Officer/Director Detail

Date