

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000013818

Entity Name: SERVING WORKERS FOR THE HARVEST INC**Current Principal Place of Business:**6930 MONARCH PARK DRIVE
APOLLO BEACH, FL 33572**Current Mailing Address:**6930 MONARCH PARK DRIVE
APOLLO BEACH, FL 33572 US**FEI Number:** 87-3836014**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WILLIAMS, KRISTA M
6930 MONARCH PARK DRIVE
APOLLO BEACH, FL 33572 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIR
Name	CONVERSE, RODNEY
Address	2826 OSPREY COVE DRIVE
City-State-Zip:	NEW SMYRNA BEACH FL 32168

Title	DIR
Name	YOUNG, DAVID
Address	10748 EL TORO DRIVE LOT 393
City-State-Zip:	RIVERVIEW FL 33569

Title	DIR
Name	SANDERS, SARA
Address	13008 TIDAL FLATS LOOP
City-State-Zip:	RIVERVIEW FL 33579

Title	DIR
Name	MOORE, GARRY
Address	7807 MONARCH GARDEN CIRCLE
City-State-Zip:	APOLLO BEACH FL 33572

Title	CEO PRESIDENT
Name	BAANNA, ALLEN P
Address	264 WAITE AVE S
City-State-Zip:	ST CLOUD MN 56301

Title	CFO
Name	WILLIAMS, KRISTA M
Address	6930 MONARCH PARK DRIVE
City-State-Zip:	APOLLO BEACH FL 33572

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: KRISTA M WILLIAMS**CFO****01/30/2023**

Electronic Signature of Signing Officer/Director Detail

Date