

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N37058

**FILED**  
**Feb 14, 2018**  
**Secretary of State**  
**CC4751583104**

**Entity Name:** LABORERS AND HARVESTORS MINISTRIES, INC.

**Current Principal Place of Business:**

1005 N. ROSE STREET  
LAKE HAMILTON, FL 33851-0775

**Current Mailing Address:**

1034 N ANDERSON AVE  
LAKELAND, FL 33805

**FEI Number:** 59-2914896

**Certificate of Status Desired:** No

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

LABORERS AND HARVESTERS MINISTRIES, INC  
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:** WANDA S. WIGGS

02/14/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name ROSS, VICTOR  
Address 1034 N. ANDERSON AVE  
City-State-Zip: LAKELAND FL 33805

Title T  
Name WIGGS, THOMAS  
Address 790 KATHY RD  
City-State-Zip: BARTOW FL 33830

Title PRESIDENT  
Name WILSON, EDWARD  
Address 1005 N. ROSE STREET  
City-State-Zip: LAKE HAMILTON FL 33851-0775

*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:** /S/THOMAS D WIGGS

**TREASURER**

02/14/2018

Electronic Signature of Signing Officer/Director Detail

Date