

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758493

FILED
Apr 21, 2010
Secretary of State

Entity Name: HARVEST PREPARATION INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business:

455 INTERSTATE CT.
UNIT B
SARASOTA, FL 34240 US

New Principal Place of Business:

Current Mailing Address:

455 INTERSTATE CT.
UNIT B
SARASOTA, FL 34240 US

New Mailing Address:

FEI Number: 59-2124134 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RICHTER, DONALD
2611 SUNNYSIDE ST
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: RICHTER, DONALD
Address: 2611 SUNNYSIDE ST
City-St-Zip: SARASOTA, FL 34239

Title: D
Name: KLINGER, ROBERT
Address: 2024 TANGLEWOOD DRIVE
City-St-Zip: SARASOTA, FL 34239

Title: TD
Name: KLINGER, SALLY S
Address: 2024 TANGLEWOOD DRIVE
City-St-Zip: SARASOTA, FL 34239

Title: SD
Name: RICHTER, LOIS A
Address: 2611 SUNNYSIDE ST
City-St-Zip: SARASOTA, FL 34239

Title: VD
Name: BEACHY, REUBEN
Address: 1055 FOX CREEK DRIVE
City-St-Zip: SARASOTA, FL 34240

Title: D
Name: BEACHY, ROSEMARY
Address: 1055 FOX CREEK DRIVE
City-St-Zip: SARASOTA, FL 34240

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: SALLY S. KLINGER

TD

04/21/2010

Electronic Signature of Signing Officer or Director

_____ Date