## **2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # N02000002704

1. Entity Name

## HEALING THE HARVEST MINISTRIES INC.



**FILED** Jul 11, 2003 8:00 am Secretary of State 07-11-2003 90055 010 \*\*\*\*61.25

THEALING THE TRAITED TWO THEO THEO					•				
70 NW 19TH ST. 477		4770 NW 19TH ST.				, -			
		<del></del>							
2. Principal Place of Business		3. Mailing Address			 		NIA TAKA TAKAI D		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
te	C	City & State			4. FEI Number Applied For Not Applicable				
Country	Zip			untry	5 Certificate of Status Desired S8.75 Additional				
6. Name and Address of Current Registered Agent			<u> </u>	2	7. Name and Addre	ess of New Registered	<u>`</u>		
	<u></u>			Name			· <u>·</u>		
BARNETT, JOYCELYN E 4770 NW 19TH ST.				Street Address (	treet Address (P.O. Box Number is Not Acceptable)				
HILL FL 33313									
				City		. FL	Zip Cod	e	
e named entity submits this stateme	nt for the purp	pose of changing its	register	ed office or register	ed agent, or both, in th	e State of Florida. I am	familiar with,	and accept	
0 1 1	0								
	Derne	$tt_{-}$	07	-07-03					
Syg4ature/fyped or printlyd name of registered a	gent and title if ap	plicable. (NOT	E: Register	ed Agent signature required	when reinstating)	DATE			
FILE NUME FEE 15 an 1.25				· -	\$5.00 May Be Added to Fees				
OFFICERS AND DIRECTORS			11.		ADDITIONS/CHANGES	S TO OFFICERS AND D	RECTORS IN	l 10	
PO BARNETT, JOYCELYN E 4770 NW 19TH ST. LAUDERHILL FL 33313	<u></u>	☐ Delete	NAM STR	ME EET ADDRESS			☐ Change	Addition	
VD MORTON, CONNIE L 3684 NW 32ND ST.	09.	☐ Delete	NAM STR	ME EET ADDRESS		×	☐ Change	Addition	
SD WILLIAMS, ADRIAN 4361 NW 7TH CT. PLANTATION FL 33317		Delete	NAM STR	IE EET ADDRESS		,	Change	Addition	
TD BELL, TRACEY 2551 NW 41ST AVE., BLDG. LAUDERHILL FL 33313	7, APT. 210	☐ Delete	NAN STR	ne Eet address			☐ Change	Addition	
		☐ Delete	NAN STR	EET ADDRESS			☐ Change	☐ Addition	
		☐ Delete	NAN	E			Change	☐ Addition	
	Place of Business  #, etc.  T, JOYCELYN E  19TH ST.  HILL FL 33313  e named entity submits this statementions of registered agent.  Systeture typed or printed name of registered at the statement of the statemen	Place of Business  #, etc.  Country  6. Name and Address of Current Register  T, JOYCELYN E  19TH ST.  HILL FL 33313  e named entity submits this statement for the purplions of registered agent.  PD  BARNETT, JOYCELYN E  4770 NW 19TH ST.  LAUDERHILL FL 33313  VD  MORTON, CONNIE L  3684 NW 32ND ST.  LAUDERDALE LAKES FL 33309  SD  WILLIAMS, ADRIAN  4361 NW 7TH CT.  PLANTATION FL 33317  TD  BELL, TRACEY  2551 NW 41ST AVE., BLDG. 7, APT. 210	# ST. FL 33313  4770 NW 19TH ST. LAUDERHILL FL 33313  Place of Business  #, etc.  Suite, Apt. #, etc.  City & State  Country  Zip  6. Name and Address of Current Registered Agent.  T, JOYCELYN E  19TH ST. HILL FL 33313  Place and entity submits this statement for the purpose of changing its tions of registered agent.  Substantiff from of registered agent and title if applicable.  (NOT PLE NOW: FEE IS \$61.25  PD  BARNETT, JOYCELYN E  4770 NW 19TH ST. LAUDERHILL FL 33313  VD  MORTON, CONNIE L 3884 NW 32ND ST. LAUDERDALE LAKES FL 33309  SD  WILLIAMS, ADRIAN 4361 NW 7TH CT. PLANTATION FL 33317  TD  Delete  BELL, TRACEY 2551 NW 41ST AVE., BLDG. 7, APT. 210 LAUDERHILL FL 33313	Place of Business  3. Mailing Address #, etc.  Suite, Apt. #, etc.  Country  Zip  Co  6. Name and Address of Current Registered Agent  T, JOYCELYN E  9 19TH ST. HILL FL 33313  anamed entity submits this statement for the purpose of changing its register tions of registered agent.  Applications of registered agent.  PO  Splanus Jopes or phylic name of registered agent and utile if applicable. (NOTE: Register Trust Fund Contribut  OFFICERS AND DIRECTORS  PO  BARNETT, JOYCELYN E  4770 NW 19TH ST.  LAUDERHILL FL 33313  VD  MORTON, CONNIE L  3884 NW 32ND ST.  LAUDERDALE LAKES FL 33309.  SD  WILLIAMS, ADRIAN  4361 NW 7TH CT.  PLANTATION FL 33317  TD  Delete  TITL  NAM  381 NW 7TH CT.  PLANTATION FL 33313  Delete  TITL  NAM  STRI  CITY  TO  Delete  TITL  NAM  STRI  CITY  TO  Delete  TITL  NAM  STRI  CITY  TO  Delete  TITL  NAM  STRI	# ST. # 1770 NW 19TH ST. LAUDERHILL FL 33313  Place of Business  3. Mailing Address  3. Mailing Address  4. etc.  Suite, Apt. #, etc.  City & State  Country  Zip  Country  6. Name and Address of Current Registered Agent.  T, JOYCELYN E  V 19TH ST.  HILL FL 33313  City  Suite, Apt. #, etc.  City & State  Country  6. Name and Address of Current Registered Agent.  Name  Street Address (  City  Street Address (  NOTE: Registered agent, (NOTE: Registered Agent agent and tide if applicable).  FILE NOW: FEE IS \$61.25  9. Election Campaign Financing Trust Fund Contribution.  OFFICERS AND DIRECTORS  11.  PD  BARNETT, JOYCELYN E  4770 NW 19TH ST.  LAUDERHILL FL 33313  VC  MORTON, CONNIE L  3884 NW 32ND ST.  LAUDERHILL FL 33319  Delete  MILLAMS, ADRIAN  4361 NW 7TH CT.  PLANTATION FL 33317  D  BELL, TRACEY  2551 NW 41ST AVE., BLDG. 7, APT. 210  LAUDERHILL FL 33313  Delete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Delete  NAME  STREET ADDRESS  CITY-ST-ZIP	H. ST. F. L. 33013  All LUDERHILL FL 33013  Place of Business  3. Mailing Address  Suite, Apt. #, etc.  Country  Zip  Country  Zip  Country  S. Certificate of State  Country  To Name and Address of Current Registered Agent  Name  Street Address (P.C. Box Number is Notername of registered agent, or both, in the consistered agent.  City  Paramed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the consistered agent.  City  Paramed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the consistered agent.  City  Paramed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the consistered agent.  City  Paramed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the consistered agent.  City  Street Address (P.C. Box Number is No.  City  FILE NOW: FEE IS \$61.25  9. Election Campaign Financing Trust Fund Contribution.  Added to Pees  PD  BARNETT, JOYCELYN E HONE HONE HONE HONE HONE HONE HONE HON	H. ST. H. 33913  AT70 NW 19TH ST. H. 33913  AMERINA Address  3. Meiling Address  3. Meiling Address  4. FEI Number.  Country  Country  Zip  Country  Zip  Country  S. Certificate of Status Desired  7. Name and Address of Current Registered Agent  Name  T. JOYCELYN E  YISTH ST.  Street Address (PO. 9cx Number is Not Acceptable)  FILE NOW: FEE IS \$61.25  9. Election Campaign Financing  Frush Fund Contribution.  PD  BARNETT, JOYCELYN E  4770 NW 19TH ST. LUDERHILL FL 33313  VD  Deleis  NEE  ADDITIONS/CHANGES TO OFFICERS AND DI  Deleis  NEE  NAME  SIRET ADDRESS  OITY ST-72  Deleis  NAME  SIRET ADDRESS  OITY ST-72  TO  Deleis  NAME  SIRET ADDRESS  OITY-ST-72  DELA DELEIS  SIRET ADRESS  OITY-ST-72  DELEIS  SIRET ADRESS  OITY-ST-72  DELEIS  SIRET ADRESS  OITY-ST-72  DELEIS	A ST. A70 MV 18TH ST. LAUDERHILL FL 33319  Pace of Business  3. Melling Address  5. date.   Check Here: IF Making Chancing   And Check Here: IF Making Check	

indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

07-07-03

954-815-5153