

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003373

FILED  
Mar 15, 2006  
Secretary of State

**Entity Name:** HARVEST PREPARATION MINISTRIES, INC.

**Current Principal Place of Business:**

6471 WEST COMMERCIAL BLVD.  
TAMARAC, FL 33319

**New Principal Place of Business:**

**Current Mailing Address:**

6471 WEST COMMERCIAL BLVD.  
TAMARAC, FL 33319

**New Mailing Address:**

**FEI Number:** 01-0699509

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOSWORTH, ALLEN  
507 SE 11TH CT.  
FT. LAUDERDALE, FL 33316 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 ( ) Delete  
Name: YORKE, ANTHONY  
Address: 5721 NW 54TH TERR.  
City-St-Zip: TAMARAC, FL 33319

Title: VD ( ) Delete  
Name: FORBES, ELISHA  
Address: 9130 SW 18TH RD.  
City-St-Zip: BOCA RATON, FL

Title: D ( ) Delete  
Name: YORKE, ANDREA  
Address: 5721 NW 54TH TERR.  
City-St-Zip: TAMARAC, FL 33319

Title: SD ( ) Delete  
Name: HARRICHAN, JENNY  
Address: 8307 WEST SAMPLE ROAD  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: TD ( ) Delete  
Name: ABRAHAMS, JAN  
Address: 680 NW 101 TERRACE  
City-St-Zip: PLANTATION, FL 33324

Title: D ( ) Delete  
Name: HALLEY, CARLOS  
Address: 428 SE 64TH TERRACE  
City-St-Zip: MARGATE, FL 33068

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANTHONY R YORKE

PD

03/15/2006

Electronic Signature of Signing Officer or Director

Date