

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003373

FILED
Jun 25, 2009
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 ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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:

YORKE, ANTHONY R
5721 N.W 54TH TERRACE
TAMARAC, FL 33319 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: ANTHONY R YORKE

06/25/2009

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: 5933 ROYAL WAY
City-St-Zip: TAMARAC, FL 33321

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
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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 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

MR.

06/25/2009

Electronic Signature of Signing Officer or Director

Date