

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31940

FILED
Apr 27, 2009
Secretary of State

Entity Name: HARVEST TIME DELIVERANCE AND FELLOWSHIP CENTER, INC.

Current Principal Place of Business:

1981 W. OAKLAND PARK BLVD
OAKLAND PARK, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 5143
FORT LAUDERDALE, FL 333105143 US

New Mailing Address:

FEI Number: 65-0128980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, PRISCILLA A.
10301 N.W. 16 ST.
PLANTATION, FL 33322 US

Name and Address of New Registered Agent:

SMITH, PRISCILLA A DV
10301 N.W. 16 ST.
PLANTATION, FL 33322 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: PRISCILLA A. SMITH

04/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SMITH, KENNETH APOSTLE
Address: 10301 NW 16TH STREET
City-St-Zip: PLANTATION, FL 33322

Title: DV () Delete
Name: SMITH, PRISCILLA EVANG.
Address: 10301 NW 16TH STREET
City-St-Zip: PLANTATION, FL 33322

Title: DS () Delete
Name: CUNNINGHAM, NATASHA
Address: 1731 NW 55TH AVENUE
City-St-Zip: LAUDERHILL, FL 33313

Title: D () Delete
Name: MITCHELL, TRICIA
Address: 4940 NW 11TH COURT
City-St-Zip: LAUDERHILL, FL 33313

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:

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: PRISCILLA A. SMITH

DV

04/27/2009

Electronic Signature of Signing Officer or Director

Date