

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N31940

**FILED**  
**Apr 24, 2012**  
**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 33310 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 DV  
10301 N.W. 16 ST.  
PLANTATION, FL 33322 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: DP  
Name: SMITH, KENNETH APOSTLE  
Address: 10301 NW 16TH STREET  
City-St-Zip: PLANTATION, FL 33322

Title: DV  
Name: SMITH, PRISCILLA PASTOR  
Address: 10301 NW 16TH STREET  
City-St-Zip: PLANTATION, FL 33322

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

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

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: KENNETH SMITH

DP

04/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date