

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90047 030 ****61.25

DOCUMENT # N99000007451	
1. Entity Name SEED TIME & HARVEST FAITH MINISTRY, INC.	

Principal Place of Business 23 B BEDFORD CT ROYAL PALM BEACH FL 33411	Mailing Address P O BOX 20214 WEST PALM BEACH FL 33416-0214
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2. Principal Place of Business - No P.O. Box # 133 Roy Court Circle	3. Mailing Address
Suite, Apt. #, etc. Royal Palm Beach	Suite, Apt. #, etc.
City & State Florida	City & State
Zip 33411	Country USA

1st MOORE CR2E037 (10/06)

6. Name and Address of Current Registered Agent MCAFDDEN, ROY 23 B BEDFORD COURT ROYAL PALM BEACH FL 33411	
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4. FEI Number 65-0966357	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code
FL	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MCFADDEN, ROY 4961 HAVERHILL COMMONS CIR. WEST PALM BEACH FL 33417 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MCFADDEN, LOUISE 4961 HAVERHILL COMMONS CIR. WEST PALM BEACH FL 33417 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D SOMMONS, JULIOUS 341 W 22ND CT. WEST PALM BEACH FL 33404 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MILLER, CURTIS 4040 NE 6TH AVE DEERFIELD BEACH FL 33064 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information 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: Roy McFadden March 24, 07 561-649-6675