

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742009

Entity Name: HARVEST FIRE WORSHIP CENTER, INC.**Current Principal Place of Business:**18291 N.W. 23 AVENUE
MIAMI GARDENS, FL 33056**Current Mailing Address:**18291 N.W. 23 AVENUE
MIAMI GARDENS, FL 33056**FEI Number: 31-1603931****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**CLARKE, DONALD F BISHOP
12122 CLASSIC DRIVE
CORAL SPRINGS, FL 33071 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: DONALD F CLARKE****04/29/2025**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	CLARKE, HELGA
Address	12122 CLASSIC DRIVE
City-State-Zip:	CORAL SPRINGS FL 33071

Title	VP
Name	CLARKE, DONALD F. BISHOP
Address	12122 CLASSIC DRIVE
City-State-Zip:	CORAL SPRINGS FL 33071

Title	PRESIDENT
Name	CLARKE, DONALD
Address	4408 KING PALM DRIVE
City-State-Zip:	TAMARAC FL 33319

Title	DIRECTOR
Name	MOSS, JOSEPH ROBERT
Address	47 STONEMARK DRIVE
City-State-Zip:	HENDERSON NV 89052

Title	TREASURER
Name	STEELE, THOMAS
Address	753 NW 116 STREET
City-State-Zip:	MIAMI FL 33168

Title	SECRETARY
Name	SAWE, KADINE
Address	3016 CHATUGE COURT
City-State-Zip:	CHARLOTTE NC 28214

Title	DIRECTOR
Name	RUBLE, RICHARD
Address	14820 ARCHERHALL STREET
City-State-Zip:	DAVIE FL 33331

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: DONALD CLARKE**PRESIDENT****04/29/2025**

Electronic Signature of Signing Officer/Director Detail

Date