### **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000009518

Entity Name: NEW HARVEST MISSIONS INTERNATIONAL, INC.

FILED Apr 29, 2013 Secretary of State CC4927014755

# **Current Principal Place of Business:**

9230 RIDGE ROAD

NEW PORT RICHEY, FL 34654

## **Current Mailing Address:**

9230 RIDGE ROAD

NEW PORT RICHEY. FL 34654

FEI Number: 43-2062423 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WALLER, RONALD D 5332 MAIN STREET NEW PORT RICHEY, FL 35652 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title DP

Name ADAWONU, AGBETI N Address 6029 MOOG ROAD

City-State-Zip: NEW PORT RICHEY FL 34653

Title DT

Name NICHOLAS, GEORGE

Address 12322 CASSOWARY LN

City-State-Zip: SPRING HILL FL 34610

Title DIRECTOR

Name BRIDGES, GLENN L Address 328 SORONO DR

City-State-Zip: GREENVILLE SC 29609

Title DIRECTOR

Name LAROSE, WILLARD

Address 558 CROSS CREEK CT City-State-Zip: CHESTER MD 21619 Title DV

Name AYLOR, OSCAR R

Address 875 SCALES RD

City-State-Zip: SUWANEE GA 30024

Title DIRECTOR

Name WEAVER, JIM

Address 627 VANCE NECK RD

City-State-Zip: MIDDLETOWN DE 19709

Title DIRECTOR

Name BARTEE, DENVER
Address 62 SPRINGMILL DR

City-State-Zip: MIDDLETOWN DE 19709

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: GEORGE NICHOLAS

**DIRECTOR** 

04/29/2013

Electronic Signature of Signing Officer/Director Detail

Date