2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2017
Secretary of State
CC2442358292

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Entity Name: HARVEST TIME JUVENILE MINISTRIES INC.

Current Principal Place of Business:

3160 SE 140TH PLACE
SUMMERFIELD, FL 34491

Current Mailing Address:

PO BOX 242
SUMMERFIELD, FL 34492

FEI Number: 45-5158680

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MADDOX, MICHAEL
3160 SE 140TH PLACE
SUMMERFIELD, FL 34491 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	PD
Name	MADDOX, MICHAEL W
Address	12444 S E 55 AVE RD
City-State-Zip:	BELLEVIEW FL 34420

Title	SD
Name	MADDOX, KATHLEEN M
Address	12444 S E 55 AVE RD
City-State-Zip:	BELLEVIEW FL 34420

Title	DIRECTOR
Name	MICHAEL, JOINER
Address	12836 SW 35TH AVE RD.
City-State-Zip:	OCALA FL 34473

Title	DIRECTOR
Name	WEBSTER, DAVID
Address	472 LAKE RD.
City-State-Zip:	OCALA FL 34472

Title	VPD, TREASURER
Name	BANKS, DORIS D
Address	6567SW 63RD CT
City-State-Zip:	OCALA FL 34474

Title	DIRECTOR
Name	MICHAEL, AWE
Address	1840 W. NOBLE ST.
City-State-Zip:	LACANTO FL 34461

Title	DIRECTOR
Name	MARTY, JEFF ATTORNEY
Address	10880 AVANA WAY
City-State-Zip:	TRINTY FL 34655

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: MICHAEL MADDOX — PRESIDENT / CEO — 01/08/2017

Electronic Signature of Signing Officer/Director Detail — Date