

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004590

Entity Name: HARVESTIME MINISTRIES INTERNATIONAL, INC.**Current Principal Place of Business:**P O BOX 2519
EASTON, MD 21601**Current Mailing Address:**P O BOX 2519
EASTON, MD 21601 US**FEI Number:** 59-3463302**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GHIOTTO, JEFF
1531 SATSOMA ST.
CLEARWATER, FL 33756 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	PTD
Name	PEREZ, BARRY K
Address	P O BOX 2519
City-State-Zip:	EASTON MD 21601

Title	VTD
Name	TUDOR, MELVILLE
Address	5090 W LAREDO ST
City-State-Zip:	CHANDLER AZ 85226

Title	TSD
Name	PEREZ, JANICE A
Address	P O BOX 2519
City-State-Zip:	EASTON MD 21601

Title	D
Name	ANDY, WHITE
Address	5090 W LAREDO ST
City-State-Zip:	CHANDLER AZ 85226

Title	D
Name	RICHARD, CINNAGLIA
Address	756 HILL CHURCH RD
City-State-Zip:	BOYERTOWN PA 19512

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: JANICE A PEREZ**SEC/TREAS****01/09/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date