

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005560

Entity Name: HARVEST ASSEMBLY OF GOD, INC.**Current Principal Place of Business:**2120 AIRPORT ROAD
LAKELAND, FL 33811**Current Mailing Address:**P O BOX 2069
LAKELAND, FL 33806**FEI Number:** 59-2992592**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CONLEY, KEITH R
4428 GALLOWAY LANE
LAKELAND, FL 33810 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	P
Name	CONLEY, KEITH RPASTOR
Address	4428 GALLOWAY LANE
City-State-Zip:	LAKELAND FL 33810

Title	D
Name	MILLS, ZADOK
Address	5006 DUCK WALLOW LANE
City-State-Zip:	PLANT CITY FL 33565

Title	SECRETARY
Name	BENTON, MARTYN
Address	5139 ALDERMAN ROAD
City-State-Zip:	LAKELAND FL 33810

Title	D
Name	DUNSFORD, MARK
Address	4638 SHERWOOD LANE
City-State-Zip:	LAKELAND FL 33813

Title	D
Name	MARVIN, TERRY L
Address	3929 TALON CREST DRIVE
City-State-Zip:	LAKELAND FL 33812

Title	TREASURER
Name	DAVIS, CARMAN M
Address	2408 ARMSTRONG ROAD
City-State-Zip:	LAKELAND FL 33811

Title	D
Name	ROSARIO, DENNIS
Address	2230 COUNTRY LOOP
City-State-Zip:	LAKEALND FL 33811

Title	D
Name	VIERA, MARY A
Address	3730 COVINGTON LANE
City-State-Zip:	LAKELAND FL 33810

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: KEITH CONLEY

P

02/22/2017

Electronic Signature of Signing Officer/Director Detail_____
Date