#### 2019 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N14000003186

Entity Name: HEALING HARVEST MINISTRIES INC.

FILED
Apr 28, 2019
Secretary of State
1018312269CR

# **Current Principal Place of Business:**

1553-55 CESERY BOULEVARD JACKSONVILLE. FL 32211

# **Current Mailing Address:**

1553-55 CESERY BOULEVARD JACKSONVILLE, FL 32211 US

FEI Number: 27-5253220 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

ALBERTA, ALFONZA SR. 1553-55 CESERY BOULEVARD JACKSONVILLE, FL 32211 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: ALFONZA ALBERTA SR 04/28/2019

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title PRES Title VP

Name ALBERTA, ALFONZA SR. Name ALBERTA, COLISTA A

Address 1553-55 CESERY BOULEVARD Address 1553-55 CESERY BOULEVARD

City-State-Zip: JACKSONVILLE FL 32211 City-State-Zip: JACKSONVILLE FL 32211

Title AVP

Name COLLINS, ROYNEISHA S

Address 1553-55 CESERY BOULEVARD

City-State-Zip: JACKSONVILLE FL 32211

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: ALFONZA ALBERTA

Electronic Signature of Signing Officer/Director Detail

CEO

04/28/2019