## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 04, 2008 8:00 am Secretary of State 03-04-2008 90017 046 \*\*\*\*70.00

Daytime Phone ∉

DOCUMENT # N9400005739  1. Entity Name HARVEST TIME INTERNATIONAL, INC.  Principal Place of Business 225 KENNEL ROAD) 225 N. KEITE   Road PO BOX 1076								<del>-</del> ,	•	
SANFORD, FI		•	SANFORD, FL 32772	US			) 37955 Millimini			
2. Principal P	lace of Business -	No P.O. Box #	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.				Chg-NP	CR2E03	<u>`</u>	
City & State	θ		City & State	City & State		4. FEI Numbe 54-1698			No	oplied For ot Applicable
Zip _ Country			Zip	p Country			5. Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Name and A	Address of Current I	Registered Agent			7. Name and	Address of New	Registered A	gent	
MURPHY, ARTHUR J JR 7462 APRELLE DRIVE				Name Street A	ddress (F	P.O. Box Numbe	r is Not Acceptat	ole)		
SANFORD	), FL 32771									
				City				FL	Zip Code	a
8. The above the obligat	named entity subnitions of registered a	nits this statement for agent.	the purpose of changing its	registered office o	r register	ed agent, or bott	n, in the State of I	Florida. I am fa	miliar with,	and accept
SIGNATURE .	Signature, typed or printe	ed name of registered agent is	and title if applicable. (NOTE	: Registered Agent signer	ure required	when reinstating)		DATE		
	Filing Fee is Due by May 1		9. Election Cam Trust Fund C	paign Financing ontribution.		\$5.00 May Bo		Make check orlda Depart		
10.	Due by May 1	OFFICERS AND DIF	Trust Fund C			Added to Fees		orida Depart	ment of St	tate
TITLE NAME STREET ADDRESS	VSD -> MURPHY, MAR 7462 APRELLE	OFFICERS AND DIF	Trust Fund C	11. TITLE NAME STREET ADDRESS		Added to Fees	Fk	orida Departi CERS AND DIR	ment of St	tate
TITLE NAME	VSD -> MURPHY, MAR	OFFICERS AND DIF	Trust Fund Co	11. TITLE NAME		Added to Fees	Fk	orida Departi ERS AND DIR	ment of St	tate
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VSD	OFFICERS AND DIF	Trust Fund C	Ontribution.  11.  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME		Added to Fees	Fk	orida Departi ERS AND DIR	ECTORS IN Change	10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VSD	OFFICERS AND DIF	Trust Fund C	Ontribution.  11.  TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	VD D RAM 125 B	Added to Fees	NGES TO OFFICE	CERS AND DIR	ECTORS IN Change	10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VSD	CONTROL OF THE CONTRO	Trust Fund C	ONTRIBUTION.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	D RAW 125 F SALF D REXIZED	Added to Fees DDITIONS/CHA	NGES TO OFFICE  S, JOSHE  EK DRIVE  32-77!  BECKYA  N STREET,	ERS AND DIR	Thange	10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VSD — MURPHY, MAF 7462 APRELLE SANFORD, FL D MANNO, JOE 805 GARDEN O LAKE MARY, F D KEEFAUVER, I 467 PINEWOO CATAULA, GA D LILES, BERNIE 131 MARITINIE	CT	Trust Fund C	TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	D RAW 125 F SALF D REXIZED	Added to Fees IDDITIONS/CH/	NGES TO OFFICE  S, JOSHE  EK DRIVE  32-77!  BECKYA  N STREET,	STHTUR	Change  Change	Addition  Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VSD — MAY 1  VSD — MURPHY, MAF  7462 APRELLE  SANFORD, FL  D  MANNO, JOE  805 GARDEN O  LAKE MARY, F  D  KEEFAUVER, I  467 PINEWOO  CATAULA, GA  D  LILES, BERNIE  131 MARITINIE  SANFORD, FL  D  ELIAS, TONY  1884 FOX HILL  HARTSVILLE, S  D  BRYAN, RAYM	I, 2008  OFFICERS AND DIF  RY H E DR 32771  GLEN LOOP EL 32746  LARRY DR. D WAY 31804  E DR 32771  CT SC 29550  IOND TREET STE 2C	Trust Fund C    Delete   Delete     Delete   Delete     Delete   Delete	ONTRIBUTION.  11.  TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	D RAW 125 F SALF D REXIZED	Added to Fees IDDITIONS/CH/	NGES TO OFFICE  S, JOSHE  EK DRIVE  32-77!  BECKYA  N STREET,	STH FLR	Change  Change  Change	Addition  Addition  Addition

PIS. SEE PORGE 2 for the SIGNATURE BIGHATURE AND TYPED OF PRINTED NAME OF BIGHING OFFICER OF BIRECTOR

SIGNATURE:

2008 NOT-FOR-PROFIT CORPORATION

	ANNUAL	REPORT								
1. Entity Nam	MENT # N9400005 T TIME INTERNATIONAL, II	Pa	7e z of:	2 pages						
Principal Plac 225 KENNEL SANFORD, FI	ROAD ZZS N. Kennel Fond		US	161	\N27 <i>G</i>	C6				
2. Principal P	flace of Business - No P.O. Box #	3. Mailing Address	- H	40057155						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		02122008	02122008 Chg-NP CR2E037 (12/06)					
City & Stat	е	City & State		4. FEI Number Applied For 54-1698630 Not Applicable						
Zip	Country.	Zip	p Country		5. Certificate of Status Desired \$8.75 Additional Fee Required					
1	6. Name and Address of Current F	Registered Agent	Name	7. Name and	Address of New Regi	stered Agent				
7462 APR	ARTHUR J JR ELLE DRIVE			idress (P.O. Box Numbe	r is Not Acceptable)					
SANFORE	), FL 32771									
			City			FL Zip Code	3			
	named entity submits this statement for tions of registered agent.	the purpose of changing its reg	gistered office or	registered agent, or bot	h, in the State of Florida	a. I am familiar with,	and accept			
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: Re	egistered Agent signatu	re required when reinstating)	·	DATE	<del></del>			
	Filing Fee Is \$61.25 Due by May 1, 2008	9. Election Campa Trust Fund Con		\$5.00 May B Added to Fees	V	check payable to Department of St				
10.	OFFICERS AND DIR	ECTORS	11.	ADDITIONS/CHA	NGES TO OFFICERS	AND DIRECTORS IN	10			
NAME STREET ADDRESS CITY-ST-ZIP	PTD MURPHY, ARTHUR J., JR. 7462 APRELLE DR SANFORD, FL 32771	☐ Detete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MURIELLO, LARRY 1327 AUTUMNI TRAIL LEWISVILLE, TX-75067	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ELLIS, ALDA SIIO STAGECOACH ROAD LITTLE ROCK, AR 72204	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP	D AFBLI JACG 200 E.FOBINS ORLANDO FL	MES III NI STREET, 91 32801	□ Change TH FLR	Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	in the state of th	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition			
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.										
SIGNATURE: John Musley John Mary My 2-19-08  BIGHATURE AND TYPED OR PENTED FAME OF BIGHING OFFICER OR DIRECTOR  Date Despire Proce #										