## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N93000004463

Entity Name: HARVEST HOUSE, INC.

## Current Principal Place of Business:

300 MOUNTAIN DR. DESTIN, FL 32541

### **Current Mailing Address:**

PO BOX 372 DESTIN, FL 32540

## FEI Number: 59-3255093

### Name and Address of Current Registered Agent:

OGLE, JERRY 155 PARADISE PT LANE SANTA ROSA BEACH, FL 32459 US

# Certificate of Status Desired: No

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

# Officer/Director Detail :

Title	PRESIDENT	Title	BD
Name	OGLE, JERRY	Name	DYAS, JULIE
Address	P.O. BOX 1181	Address	603 MOUNTAIN DR. APT. 1
City-State-Zip:	DESTIN FL 32540	City-State-Zip:	DESTIN FL 32541
Title	BOARD OF DIRECTOR	Title Name Address City-State-Zip:	BD MCGEE, JERRY 615 CHOCKTAW DRIVE DESTIN FL 32541
Name	WIND, MIKE		
Address	4325 COMMONS DR. WEST		
City-State-Zip:	DESTIN FL 32541		
Title	D	Title	BOARD OF DIRECTOR
Name	JOYNER, LORI A	Name	BELCHER, JASON 29 N. EGLIN PARKWAY
Address	PO BOX 1823		
City-State-Zip:	DESTIN FL 32540		
, , , , , , , , , , , , , , , , , , ,		City-State-Zip:	FT WALTON BEACH FL 32548
Title	SECRETARY, TREASURER		
Name	BERG, MICAH		
Address	124 BENNING DR SUITE 4		

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: LORI JOYNER

City-State-Zip: DESTIN FL 32541

EXECUTIVE DIRECTOR 02/27/2014

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Feb 27, 2014 Secretary of State CC03614555551

Date