2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005739

Entity Name: HARVEST TIME INTERNATIONAL, INC.

Current Principal Place of Business:

225 N. KENNEL ROAD SANFORD, FL 32771

Current Mailing Address:

225 N. KENNEL ROAD SANFORD, FL 32771 US

FEI Number: 54-1698630

Name and Address of Current Registered Agent:

MURPHY, ARTHUR JJR 225 N. KENNEL ROAD SANFORD, FL 32771 US Secretary of State CC9992221216

Date

Certificate of Status Desired: Yes

FILED Mar 25, 2015

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	PD	Title	VD
Name	MURPHY, ARTHUR, JR. J	Name	MURPHY, MARY H
Address	225 N. KENNEL ROAD	Address	225 N. KENNEL ROAD
City-State-Zip:	SANFORD FL 32771	City-State-Zip:	SANFORD FL 32771
Title	STD	Title	D
Name	SMOLINSKY, ANDRE	Name	BRYAN, RAY
Address	225 N. KENNEL ROAD	Address	225 N. KENNEL ROAD
City-State-Zip:	SANFORD FL 32771	City-State-Zip:	SANFORD FL 32771
Title	D	Title	D
Title Name	D DAVIES, GUS	Title Name	D ELIAS, TONY
	-		
Name Address	DAVIES, GUS	Name	ELIAS, TONY
Name Address	DAVIES, GUS 225 N. KENNEL ROAD	Name Address	ELIAS, TONY 225 N. KENNEL ROAD
Name Address City-State-Zip:	DAVIES, GUS 225 N. KENNEL ROAD SANFORD FL 32771	Name Address City-State-Zip:	ELIAS, TONY 225 N. KENNEL ROAD SANFORD FL 32771
Name Address City-State-Zip: Title	DAVIES, GUS 225 N. KENNEL ROAD SANFORD FL 32771 D	Name Address City-State-Zip: Title	ELIAS, TONY 225 N. KENNEL ROAD SANFORD FL 32771 D
Name Address City-State-Zip: Title Name Address	DAVIES, GUS 225 N. KENNEL ROAD SANFORD FL 32771 D ELLIS, ALDA	Name Address City-State-Zip: Title Name	ELIAS, TONY 225 N. KENNEL ROAD SANFORD FL 32771 D IANNELLO, GUY

Continues on page 2

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: ANDRE SMOLINSKY

SECRETARY

03/25/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	D	Title	D
Name	MANNO, JOE	Name	MAURIELLO, LARRY
Address	225 N. KENNEL ROAD	Address	225 N. KENNEL ROAD
City-State-Zip:	SANFORD FL 32771	City-State-Zip:	SANFORD FL 32771
Title	D	Title	D
ritte	D	THUE	В
Name	TAPSCOTT, DECKER	Name	WESTBERRY, TOM
Address	225 N. KENNEL ROAD	Address	225 N. KENNEL ROAD
City-State-Zip:	SANFORD FL 32771	City-State-Zip:	SANFORD FL 32771
Title	D		
Name	HINN, SAM		
Address	225 N KENNEL RD		

City-State-Zip: SANFORD FL 32771