2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400005739

Entity Name: HARVEST TIME INTERNATIONAL, INC.

itity Name: HARVEST TIME INTERNATIONAL, IN

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 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MURPHY, ARTHUR JJR 225 N. KENNEL ROAD SANFORD, FL 32771 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

FILED Mar 28, 2016

Secretary of State

CC9735870189

Officer/Director Detail:

Title	CHAIRMAN, DIRECTOR, PRESIDENT	Title	VC, DIRECTOR, VP
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 DIRECTOR, TREASURER Title DIRECTOR, SECRETARY

Name SMOLINSKY, ANDRE Name TING, DANIEL

Address 225 N. KENNEL ROAD Address 225 N. KENNEL ROAD
City-State-Zip: SANFORD FL 32771 City-State-Zip: SANFORD FL 32771

Title DIRECTOR Title DIRECTOR

Name BRYAN, RAY Name DAVIES, GUS

Address 225 N. KENNEL ROAD Address 225 N. KENNEL ROAD
City-State-Zip: SANFORD FL 32771 City-State-Zip: SANFORD FL 32771

Title DIRECTOR Title DIRECTOR

NameELIAS, TONYNameELLIS, ALDAAddress225 N. KENNEL ROADAddress225 N. KENNEL ROAD

City-State-Zip: SANFORD FL 32771

City-State-Zip: SANFORD FL 32771

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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

DIRECTOR, TREASURER

03/28/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR
Name HINN, SAM

Address 225 N. KENNEL ROAD

City-State-Zip: SANFORD FL 32771

Title DIRECTOR
Name MANNO, JOE

Address 225 N. KENNEL ROAD

City-State-Zip: SANFORD FL 32771

Title DIRECTOR

Name MURPHY, DOROTHY
Address 225 N. KENNEL ROAD
City-State-Zip: SANFORD FL 32771

Title DIRECTOR

Name WESTBERRY, TOM
Address 225 N. KENNEL ROAD
City-State-Zip: SANFORD FL 32771

Title DIRECTOR

Name GUY, IANNELLO

Address 225 N. KENNEL ROAD City-State-Zip: SANFORD FL 32771

Title DIRECTOR

Name MAURIELLO, LARRY
Address 225 N. KENNEL ROAD
City-State-Zip: SANFORD FL 32771

Title DIRECTOR

Name DECKER, TAPSCOTT
Address 225 N. KENNEL ROAD
City-State-Zip: SANFORD FL 32771