

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F46660

**Entity Name:** D & K HARVESTING, INC.

**Current Principal Place of Business:**

890 SPRATT BLVD.  
LABELLE, FL 33935

**FILED**  
**Apr 28, 2014**  
**Secretary of State**  
**CC6156326426**

**Current Mailing Address:**

P.O. BOX 1347  
LABELLE, FL 33975

**FEI Number:** 59-2129884

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MARSH, LARRY  
5280 RIVER BLOSSOM LANE  
LABELLE, FL 33935 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

**Officer/Director Detail :**

Title	P	Title	VP
Name	MARSH, JAMES L	Name	MURRAY, GERALD
Address	5280 RIVER BLOSSOM LANE	Address	4739 COUNTY RD 78 W
City-State-Zip:	LABELLE FL 33935	City-State-Zip:	LABELLE FL 33935

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JAMES L MARSH

**PRESIDENT**

**04/28/2014**

Electronic Signature of Signing Officer/Director Detail

Date