

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000004969

**Entity Name:** HUSKER HARVESTING, INC.

**Current Principal Place of Business:**

1250 STATE ROAD 29 NORTH  
FELDA, FL 33930

**Current Mailing Address:**

POST OFFICE BOX 245  
FELDA, FL 33930

**FEI Number:** 20-8222917

**Certificate of Status Desired:** No

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

ADAMS, AARON D.  
1250 STATE ROAD 29 NORTH  
FELDA, FL 33930 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	PST	Title	D
Name	ADAMS, AARON D.	Name	ADAMS, AARON D.
Address	POST OFFICE BOX 245	Address	POST OFFICE BOX 245
City-State-Zip:	FELDA FL 33930	City-State-Zip:	FELDA FL 33930

*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:** AARON D. ADAMS

**PRESIDENT**

**04/28/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date