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Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 319504

1. Corporation Name
HARVEST VILLAGE NATURAL FOODS, INC.



Principal Place of Business
1928 HARRISON STREET
HOLLYWOOD FL 33020

Mailing Address
1928 HARRISON STREET
HOLLYWOOD FL 33020

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/03/1987

4. FEI Number

59-1172538

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$3.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business
21. *Harvest Village N Foods*

2a. Mailing Address

26. *Same*

22. *1928 Harrison St.*

27. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

23. *Hollywood FLA.*

28. City & State

28. City & State

24. *33020*

25. *Broward*

29. Zip

30. Country

9. Name and Address of Current Registered Agent

SCOTT, BETTY JEAN
1928 HARRISON STREET
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Betty Jean Scott

(NOTE: Registered Agent signature required when reinstating)

DATE

1-12-99

12. OFFICERS AND DIRECTORS

TITLE VP ☐ DELETE

NAME WHEATLEY, JAMES H

STREET ADDRESS 316 UTAH AVE

CITY-ST-ZIP FT. LAUDERDALE FL 33312

TITLE P ☐ DELETE

NAME SCOTT, BETTY JEAN

STREET ADDRESS 1928 HARRISON STREET

CITY-ST-ZIP HOLLYWOOD FL 33020

TITLE S ☐ DELETE

NAME WHEATLEY, SHIRLEY H

STREET ADDRESS 316 UTAH AVE.

CITY-ST-ZIP FT. LAUDERDALE FL 33312

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James H. Wheatley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

1-12-99
Date Time Phone #

CR2E034 (1/1/98)