

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 557178

FILED
Feb 24, 2009
Secretary of State

Entity Name: A & B HARVESTING, INC.

Current Principal Place of Business:

283 S. BRIDGE ST. (33935)
P.O. BOX 118
LABELLE, FL 33935

New Principal Place of Business:

283 S. BRIDGE ST. (33935)
LABELLE, FL 33935

Current Mailing Address:

P O BOX 118
LABELLE, FL 33935

New Mailing Address:

283 S. BRIDGE ST. (33935)
LABELLE, FL 33935

FEI Number: 59-1787363

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BEER, BRUCE
HWY 78 WEST, P.O. BOX 118
LABELLE, FL 33935 US

Name and Address of New Registered Agent:

BEER, BRUCE
HWY 78 WEST
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:

02/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BEER, BRUCE,
Address: HWY. 78 WEST
City-St-Zip: LABELLE, FL

Title: STD () Delete
Name: BEER, JASON S
Address: 19790 MARSHALL FIELD RD
City-St-Zip: LABELLE, FL 33935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRUCE BEER

PD

02/24/2009

Electronic Signature of Signing Officer or Director

Date