

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000125690

Entity Name: HARVEST FILMS, LLC

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

923 BROOKHAVEN DR
SAINT AUGUSTINE, FL 32092 US

New Principal Place of Business:

571 ASH ST
ORANGE PARK, FL 32073 US

Current Mailing Address:

923 BROOKHAVEN DR
SAINT AUGUSTINE, FL 32092 US

New Mailing Address:

571 ASH STREET
ORANGE PARK, FL 32073 US

FEI Number: 26-2902088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLER, KRISTA L
923 BROOKHAVEN DR
SAINT AUGUSTINE, FL 32092 US

Name and Address of New Registered Agent:

WELLER, KRISTA L
571 ASH STREET
ORANGE PARK, FL 32073 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:

04/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WELLER, KRISTA LEE
Address: 923 BROOKHAVEN DR
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KRISTA L WELLER

P

04/22/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date