

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L55363

1. Entity Name

A. H. HARVESTING, INC.

FILED

May 09, 2000 8:00 am
Secretary of State

05-09-2000 90060 034 ***150.00

Principal Place of Business

Mailing Address

% NORMA F. CASSENS
3180 N KINGS HWY
FT PIERCE FL 34951

% NORMA F. CASSENS
3180 N KINGS HWY
FT PIERCE FL 34951-4025

2. Principal Place of Business

3. Mailing Address

P.O. Box 613

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Fl. Pierce

4. FEI Number

65-0175768

Applied For

Not Applicable

Zip

Country

Zip

Country

34954-0613 St. Lucie

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CASSENS, STEVEN D.
3180 NORTH KINGS HIGHWAY
FT. PIERCE 34951

Name

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

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

SD. Cassens

(NOTE: Registered Agent signature required when reinstating)

5-1-00

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
CASSENS, STEVEN D.
3180 NORTH KINGS HIGHWAY
FT. PIERCE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
1876 Shinn Road ☒ Change ☐ Addition
34945

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
DIXON, CATHERINE C
3180 N. KINGS HWY.
FT. PIERCE FL 34951 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
SUSAN F. CASSENS ☒ Change ☐ Addition
1876 Shinn Road
FT. PIERCE, FL 34945

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Catherine Cassens Dixon ☐ Change ☒ Addition
1898 Shinn Road
Fl. Pierce, FL 34945

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Treasurer
SUSAN F. Cassens ☐ Change ☒ Addition
1876 Shinn Road
Fl. Pierce, FL 34945

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SD. Cassens

Date

5-1-00

Daytime Phone #

461-4615