

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M04000002040

**Entity Name:** HARVEST SENSATIONS, LLC

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1205 WHOLESALE STREET  
LOS ANGELES, CA 90021

**New Principal Place of Business:**

**Current Mailing Address:**

24560 SILVER CLOUD COURT  
MONTEREY, CA 93940

**New Mailing Address:**

**FEI Number:** 06-1612238

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GRINSTEAD, STEVE  
Address: 24560 SILVER CLOUD COURT  
City-St-Zip: MONTEREY, CA 93940

Title: MGR  
Name: LOFFREDO, GENE  
Address: 24560 SILVER CLOUD CT  
City-St-Zip: MONTEREY, CA 93940

Title: MGR  
Name: FERACHI, PAUL  
Address: 24560 SILVER CLOUD CT  
City-St-Zip: MONTEREY, CA 93940

I hereby 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: CHERYL WONG

CTRL

04/24/2012

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