2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

6888 SHADOW CAST LANE

City-St-Zip: LAKELAND, FL 33813

Address:

FILED Apr 26, 2006

DOCUM	IENI# NO	5000012927		Secretary of State	
Entity Nar	ne: PRAYEF	R HARVEST, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	DOW CAST L D, FL 33813	ANE			
Current Mailing Address:			New Mailing Address:		
	DOW CAST L D, FL 33813	ANE			
FEI Number:	20-4540930	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
	L, DONNA DOW CAST L D, FL 33813	ANE US			
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR					
	Electro	nic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (CHAPPELL, D 6888 SHADOV LAKELAND, F	V CAST LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (HANKINS, DAI 5008 DUNSTA ORLANDO, FL	BLE COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: DONNA CHAPPELL 04/26/2006 DIR