

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005167

FILED  
Feb 08, 2012  
Secretary of State

**Entity Name:** NEW HARVEST FELLOWSHIP AG INC.

**Current Principal Place of Business:**

4289 BERRYHILL ROAD  
PACE, FL 32571

**New Principal Place of Business:**

**Current Mailing Address:**

4289 BERRYHILL ROAD  
PACE, FL 32571

**New Mailing Address:**

**FEI Number:** 22-3930878

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ISAACSON, ALAN R  
4289 BERRYHILL ROAD  
PACE, FL 32571 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: JOHNSON, RON  
Address: 4289 BERRYHILL ROAD  
City-St-Zip: PACE, FL 32571

Title: SD  
Name: CONNELL, JAMES  
Address: 4289 BERRYHILL ROAD  
City-St-Zip: PACE, FL 32571

Title: T  
Name: CONNELL, JAMES  
Address: 4289 BERRYHILL ROAD  
City-St-Zip: PACE, FL 32571

I hereby 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 all other like empowered.

**SIGNATURE:** RON JOHNSON

PD

02/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date