

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N24473 (3)

1. Corporation Name

NATURE'S HARVEST, INC.



Principal Place of Business

Mailing Address

**C/O LEAH PALUMBO
1405 HIGHLAND AVENUE
MELBOURNE FL 32935**

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1405 HIGHLAND AVENUE
MELBOURNE FL 32935**

3. Date Incorporated or Qualified

01/25/1988

3a. Date of Last Report

05/01/1995

4. FEI Number

59-1727452

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PALUMBO, LEAH
1405 HIGHLAND AVENUE
MELBOURNE FL 32935**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **SD** ☒ DELETE
NAME **PREVATT, MELISSA**
STREET ADDRESS **3440 BETH LANE**
CITY-ST-ZIP **MELBOURNE FL**

1.1 TITLE **D** ☐ Change ☒ Addition
1.2 NAME **Betty Ross**
1.3 STREET ADDRESS **2500 Eagle Dr.**
1.4 CITY-ST-ZIP **Melbourne, FL 32935**

TITLE **D** ☒ DELETE
NAME **ERVIN-FRAZIER, BEVERLY**
STREET ADDRESS **4605 RAYBURN ROAD**
CITY-ST-ZIP **COCOA FL**

2.1 TITLE **SD** ☐ Change ☒ Addition
2.2 NAME **Melodee A. Dew**
2.3 STREET ADDRESS **453 Bluff Dr.**
2.4 CITY-ST-ZIP **Melbourne, FL 32901**

TITLE **TD** ☐ DELETE
NAME **DALE, JAY D**
STREET ADDRESS **2311 DUNBAR VE**
CITY-ST-ZIP **MAELBOURNE FL 32901**

3.1 TITLE **D** ☐ Change ☒ Addition
3.2 NAME **Joanne Priaulx**
3.3 STREET ADDRESS **874-8 W. Eau Gallie Blvd.**
3.4 CITY-ST-ZIP **Melbourne, FL 32935**

TITLE **D** ☒ DELETE
NAME **SMITH, JAY STEVEN**
STREET ADDRESS **439 COUNT STREET**
CITY-ST-ZIP **MELBOURNE FL 32901**

4.1 TITLE **D** ☐ Change ☒ Addition
4.2 NAME **Henry Morin**
4.3 STREET ADDRESS **308 S. Babcock St.**
4.4 CITY-ST-ZIP **Melbourne, FL 32901**

TITLE **P** ☒ DELETE
NAME **PARKINSON, RANDALL**
STREET ADDRESS **703 SHADY LANE**
CITY-ST-ZIP **EAU GALLIE FL**

5.1 TITLE **D** ☐ Change ☒ Addition
5.2 NAME **Barbara Bingnear**
5.3 STREET ADDRESS **289 Coral Dr.**
5.4 CITY-ST-ZIP **Melbourne, FL 32935**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE **P** ☐ Change ☒ Addition
6.2 NAME **Tina Stark**
6.3 STREET ADDRESS **664 Cayuga Ave. N.E.**
6.4 CITY-ST-ZIP **Palm Bay, FL 32905**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jay D. Dale

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-96 407-254-4966

Date

Daytime Phone #

CR2E037 (12/95)