

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Jan 12, 2006  
Secretary of State

DOCUMENT# N48010

Entity Name: HARMONY FARMS, INCORPORATED

**Current Principal Place of Business:**

5300 STADIUM PARKWAY  
ROCKLEDGE, FL 32955 US

**New Principal Place of Business:**

**Current Mailing Address:**

5300 STADIUM PARKWAY  
ROCKLEDGE, FL 32955 US

**New Mailing Address:**

FEI Number: 59-3114190      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

VON LAUFEN, MICHAEL J  
1020 WROBEL PLACE  
MELBOURNE, FL 32904 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: T ( ) Delete  
Name: VON LAUFEN, MIKE  
Address: 1020 WROBEL PLACE  
City-St-Zip: WEST MELBOURNE, FL

Title: P ( ) Delete  
Name: PARYZEK, PEARL  
Address: 405 ANCHOR WAY  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: V ( ) Delete  
Name: SHAFFER, JOHN  
Address: 230 LAKE SHORE DR  
City-St-Zip: ROCKLEDGE, FL 32955

Title: S ( ) Delete  
Name: ARCHER, LINDA  
Address: 506 ROYSTON LANE  
City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Delete  
Name: MARDIAT, SUSAN  
Address: 3175 GRANT RD  
City-St-Zip: GRANT, FL 32949

Title: D ( ) Delete  
Name: KILLIAN, MICHELLE  
Address: 89 VILLAGE STREET  
City-St-Zip: SATELLITE BEACH, FL 32937

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: ADAMS, LISA  
Address: 2220 FRONT ST. # 404  
City-St-Zip: MELBOURNE, FL 32901

Title: D (X) Change ( ) Addition  
Name: GETTLEMEN, CARLA  
Address: 4050 JAMES RD  
City-St-Zip: COCOA, FL 32926

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: MEYER, TONI  
Address: 1061 HYDE PARK LANE  
City-St-Zip: MELBOURNE, FL 32935

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: MICHAEL VON LAUFEN

T

01/12/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date