

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 DEC 10 PM 1:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N48010

1. Corporation Name

HARMONY FARMS, INCORPORATED

2. Principal Office Address

5300 Stadium Parkway

Suite, Apt. #, etc.

City & State

Rockledge, FL

Zip

32955

Country

USA

3. Mailing Office Address

5300 Stadium Parkway

Suite, Apt. #, etc.

City & State

Rockledge, FL

Zip

32955

Country

USA

REINSTATEMENT 01-03

500025384815

12/10/03--01022--002 **358.75

4. Date Incorporated or Qualified
To Do Business in Florida

03/19/1992

5. FEI Number

59 3114190

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$5.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Michael Von Laufen

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

1020 Wrobel Place

Suite, Apt. #, Etc.

City

Melbourne

State

FL

Zip Code

32904

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Michael Von Laufen
REGISTERED AGENT MUST SIGN

Date

11/28/03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Pearl Paryzek	405 Anchor Key	Melbourne Beach, FL 32951
VP	John Shaffer	230 Lake Shore Dr.	Rockledge, FL 32955
S	Robert B. Rogan	1024 Lennox Way	Melbourne, FL 32940
T	Michael Von Laufen	1020 Wrobel Place	Melbourne, FL 32904
D	Susan Mardiat	3175 Grant Rd.	Grant, FL 32949
D	Michelle Killian	89 Village Street	Satellite Beach, FL 32937

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(b), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

PAMELA J. ROGAN - Pamela J. Rogan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11-28-03 (321)242-4929

Daytime Phone #

CR2001 (10/02)

CONTINUATION PAGE AS TO ITEM #9

RE: Document No.: N48010
Corporation: HARMONY FARMS, INCORPORATED

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
<i>Titles</i>	<i>Name of Officers and/or Directors</i>	<i>Street Address of Each Officer and/or Director</i>	<i>City / State / Zip</i>
D	Lorraine DeMontigny	5005 Hitch-N-Post Lane	Micco, FL 32976
D	Carla Reece Gettleman	970 N. U.S. Highway 1, #5	Cocoa, FL 32922
Exec.D	Pamela J. Rogan	1024 Lennox Way	Melbourne, FL 32940