

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000054185

FILED  
Feb 18, 2006  
Secretary of State

Entity Name: M.A.C. HARVESTING, INC,

## Current Principal Place of Business:

3405 MOUNTAIN LAKE CUTOFF RD  
LAKE WALES, FL 33853

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 10402  
WINTER HAVEN, FL 33885

## New Mailing Address:

FEI Number: 59-3649981

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SOUTHWEST 22ND AVENUE., 4TH FLO  
MIAMI, FL 33145 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: HARRIS, ANGELA A  
Address: 6694 NW 31ST CIRCLE  
City-St-Zip: JENNINGS, FL 32053

Title: D ( ) Delete  
Name: MEDINA, MANUEL T JR.  
Address: 3405 MOUNTAIN LAKE CUTOFF RD  
City-St-Zip: LAKE WALES, FL 33853

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANGELA A. HARRIS

VD

02/18/2006

Electronic Signature of Signing Officer or Director

Date