## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

changed, or on an attach

SIGNATURE:

## Apr 28, 2004 8:00 am Secretary of State DOCUMENT # P02000134966 1. Entity Name 04-28-2004 90184 001 \*\*\*150.00 HARVEST FRESH PRODUCE OF BREVARD, INC. Principal Place of Business Mailing Address 725A SOUTH WICKHAM ROAD WEST MELBOURNE FL 32904 725A SOUTH WICKHAM ROAD 94069750 WEST MELBOURNE FL 32904 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State Applied For 4. FEI Number 74-3074643 Not Applicable Ζip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TAYLOR, RICHARD Street Address (P.O. Box Number is Not Acceptable) 3150 NORTH WICKHAM RD SUITE 3 **MELBOURNE FL 32935** Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or punted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. PD Change Addition TITLE ☐ Delete TITLE NAME WALKER, RICHARD K NAME 2630 CORBUSIER DRIVE STREET ADDRESS STREET ADDRESS MELBOURNE FL 32935 CITY-ST-ZIP CITY-ST-ZIE TD ==== ☐ Change ☐ Addition TITLE Detete TITLE WALKER, NANCY J NAME . NAME 2630 CORBUSIER DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP --MELBOURNE FL 32935-CITY-ST-ZIP $\overline{\mathsf{VD}}$ TITLE VD ☐ Delete TITLE Change C ■ Addition HEINTZ, JAMES L NAME HEINTZ, JAMES L STREET ADDRESS STREET ADDRESS 425 ONTARIO ST NW 374 VIN ROSE CIRCLE, SE CITY-ST-ZIP PALM BAY FL 32909 CITY-ST-ZIP PAUSA BAY, FU 32907 SD ☐ Delete TITLE Change Addition HEINTZ, HEIDI M NAME HEINTZ, HEIDI M NAME 374 VIN ROSE CIRCLE, SE 425 ÓNTARIO ST NW STREET ADDRESS STREET ADDRESS PALM BAY FL 32909 CITY-ST-7IP CITY-ST-ZIP 32907 PALM BAY, FL ☐ Change ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Chance TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 repeiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

ANCY J. WALKER

FILED