

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000024171

FILED
May 27, 2008
Secretary of State

Entity Name: HARVESTIME LANDSCAPING, INC.

Current Principal Place of Business:

10345 SW 42ND TERRACE
BELLEVIEW, FL 34420

New Principal Place of Business:

10345 SE 42ND TERRACE
BELLEVIEW, FL 34420

Current Mailing Address:

10345 SW 42ND TERRACE
BELLEVIEW, FL 34420

New Mailing Address:

PO BOX 1019
BELLEVIEW, FL 34421

FEI Number: 26-0351527

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRETT L. SWIGERT, P.A.
10345 SW 42ND TERRACE
BELLEVIEW, FL 34420 US

Name and Address of New Registered Agent:

BRETT L. SWIGERT, P.A.
10935 SE 177TH PL, SUITE #205
SUMMERFIELD, FL 34419 US

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: _____

05/27/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HILL, JASON P
Address: P O BOX 1019
City-St-Zip: BELLEVIEW, FL 34420

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: O () Change (X) Addition
Name: HILL, STACIE R VP
Address: PO BOX 1019
City-St-Zip: BELLEVIEW, FL 34421

I hereby certify that the information supplied with this filing does not qualify 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: STACIE R HILL

VP

05/27/2008

Electronic Signature of Signing Officer or Director

Date