

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000097265

Entity Name: HARVEST ALL, INC.

**FILED**  
**Mar 19, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

732 DEER CREEK DRIVE  
CROSSVILLE, TN 38571 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 2524  
CROSSVILLE, TN 38557 US

**New Mailing Address:**

FEI Number: 65-0638669

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LYNN, JOHN M  
48 N.E. 15TH STREET  
SECOND FLOOR  
HOMESTEAD, FL 33030 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: DPS  
Name: PUGH, OSCAR  
Address: 732 DEER CREEK DRIVE  
City-St-Zip: CROSSVILLE, TN 38571

Title: VP  
Name: PUGH, LISA J  
Address: 732 DEER CREEK DRIVE  
City-St-Zip: CROSSVILLE, TN 38571

I hereby 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 all other like empowered.

SIGNATURE: LISA J PUGH

VP

03/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date