2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000011720

Entity Name: HARVEST THYME CAFE, INC.

FILED Jun 30, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

% MIKE DAVIDSON % MIKE DAVIDSON

32 SOUTH MAIN STREET 2 WEST UNIVERSITY AVENUE ALACHUA, FL 32616 GAINESVILLE, FL 32601

Current Mailing Address: New Mailing Address:

% MIKE DAVIDSON % MIKE DAVIDSON **BOX 757** 10416 NW 148TH PLACE ALACHUA, FL 32616 ALACHUA, FL 32615

FEI Number: 59-3556918 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DAVIDSON, MIKE DAVIDSON, MIKE 10416 NW 148TH PLACE 14186 MAIN ST. ALACHUA, FL 32616 ALACHUA, FL 32615 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: 06/30/2005

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition DAVIDSON, MICHAEL J DAVIDSON, MICHAEL J Name: Name: 14186 MAIN ST. Address: 10416 NW 148TH PLACE Address: City-St-Zip: ALACHUA, FL 32616 City-St-Zip: ALACHUA, FL 32615

Title: Title: (X) Change () Addition () Delete

DAVIDSON, JENNIFER DAVIDSON, JENNIFER Name: Name: 1486 MAIN ST. Address: 10416 NW 148TH PLACE Address: ALACHUA, FL 32616 ALACHUA, FL 32615 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHAEL J. DAVIDSON **PRES** 06/30/2005