2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2008
Secretary of State

DOCUMENT# S15562

Entity Name: ATLANTIC HARVESTER CORPORATION

Current Principal Place of Business:

ATLANTIC HARVESTER CORP.
1056 BOSTON NECK RD #6
NARRANGANSETT, RI 02880

New Principal Place of Business:

ATLANTIC HARVESTER CORP.
3 WOODLAND DRIVE
HOPE VALLEY, RI 02832

Current Mailing Address:

ATLANTIC HARVESTER CORP.
P.O. BOX 586
WAKEFIELD, RI 028800586

New Mailing Address:

FEI Number: 65-0254961 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POWELL, CLAYTON C
2945 SOUTH US HIGHWAY 1
FORT PIERCE, FL 34982 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: P ( ) Delete
Name: JACOBS, TIMOTHY
Address: PO BOX 586
City-St-Zip: WAKEFIELD, RI 028800586

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: TIMOTHY JACOBS P 02/28/2008

Electronic Signature of Signing Officer or Director — Date