Robin Carnahan Secretary of State
2009 ANNUAL REGISTRATION REPORT
NONPROFIT

File Number: 200917391641
N00677757
Date Filed: 06/22/2009
Robin Carnahan
Secretary of State

REPORT DUE BY: **08/31/2009**

ORGANIZED UNDER THE LAWS OF: **Missouri**

N00677757
Harvest Foundation, Inc.
BRUCE LAWRENCE
250 NORTH KINGSHIGHWAY
SIKESTON, MO 63801

1 **PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:**
801 Hamilton, PO Box 124
STREET
Vanduser, MO **63784**
CITY/STATE ZIP

2 **If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.**

☐ The new registered agent _____
IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.

☐ The new registered office address _____
Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

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OFFICERS — **A**

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). **MUST LIST AT LEAST ONE OFFICER BELOW.**

PRES **Dennis L. McElwrath**
STREET/RT **801 Hamilton, PO Box 124**
CITY/STATE/ZIP **Vanduser, MO 63784**
V-PRES .....
STREET/RT .....
CITY/STATE/ZIP _____
SEC'Y .....
STREET/RT .....
CITY/STATE/ZIP _____
TREAS .....
STREET/RT .....
CITY/STATE/ZIP _____

BOARD OF DIRECTORS — **B**

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). **MUST LIST AT LEAST THREE DIRECTORS BELOW.**

NAME **Dennis J. McElwrath**
STREET/RT **801 Hamilton PO Box 124**
CITY/STATE/ZIP **Vanduser, MO 63784**
NAME **Trevor Spencer**
STREET/RT **801 Hamilton PO Box 124**
CITY/STATE/ZIP **Vanduser, MO 63784**
NAME **Chuck H Ellerbrock**
STREET/RT **801 Hamilton PO Box 124**
CITY/STATE/ZIP **Vanduser, MO 63784**
NAME **Tony Wood**
STREET/RT **801 Hamilton PO Box 124**
CITY/STATE/ZIP **Vanduser, MO 63784**

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

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The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.

Authorized party or officer sign here **Dennis J. McElwrath** (Required)

Please print name and title of signature: **Dennis J. McElwrath** / **President**
NAME TITLE

REGISTRATION REPORT FEE IS:
____ $10.00 If filed on or before 8/31
____ $15.00 If filed after 8/31
Corporation will be administratively dissolved if report is not filed by November 30th.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL) _____

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO DIRECTOR OF REVENUE

RETURN COMPLETED REGISTRATION REPORT AND PAYMENT TO THE SECRETARY OF STATE - P.O. BOX 1366, JEFFERSON CITY, MO 65102

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS:

DIRECTOR
JOE SOWERS
801 HAMILTON, PO BOX 124
VANDUSER, MO 63784

DIRECTOR
DENNIS L. MCELWRATH
801 HAMILTON, PO BOX 124
VANDUSER, MO 63784

DIRECTOR
RICKY LUKE
801 HAMILTON, P.O. BOX 127
VANDUSER, MO 63784