

1.) CORPORATION NAME:

**CHINA HARVEST, INC.**

DUE DATE: **6/30/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER**

**GARY A RUSSELL**

**4116 LINDENWOOD DR**

**CHESAPEAKE, VA 23321-1814**

SCC ID NO: **04855698**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**CHESAPEAKE CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 12249

CITY/ST/ZIP: WICHITA, KS 67277-2249

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: STEVE MILLER  
TITLE: S/D  
ADDRESS: PO BOX 12249  
CITY/ST/ZIP/CO: WICHITA, KS 67277-2249

OFFICER  DIRECTOR

NAME: BOB WEINER  
TITLE: DIRECTOR  
ADDRESS: PO BOX 1799  
CITY/ST/ZIP/CO: GAINESVILLE, FL 32602-

OFFICER  DIRECTOR

NAME: GARY A RUSSELL  
TITLE: P/D  
ADDRESS: 4116 LINDENWOOD DR  
CITY/ST/ZIP/CO: CHESAPEAKE, VA 23321-1814

OFFICER  DIRECTOR

NAME: MALCOLM WEBBER  
TITLE: CHAIRMAN  
ADDRESS: 2601 BENHAM AVE  
CITY/ST/ZIP/CO: ELKHART, IN 46517-

OFFICER  DIRECTOR

NAME: JACK BROWN  
TITLE: TREASURER  
ADDRESS: 6465 N OAK SHADOWS CIR  
CITY/ST/ZIP/CO: MEMPHIS, TN 38119-

OFFICER  DIRECTOR

NAME: MARY GILLIAM TITLE: VICE CHAIRMAN ADDRESS: 2929 DREAMCATCHER LOOP CITY/ST/ZIP/CO: CASTLE ROCK, CO 80109-8695	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: PETER LEE TITLE: DIRECTOR ADDRESS: 2660 W WOODLAND DR STE 105 CITY/ST/ZIP/CO: ANAHEIM, CA 92801-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: CHARLIE BECK TITLE: DIRECTOR ADDRESS: 189 LINDSEY LN CITY/ST/ZIP/CO: VOLANT, PA 16156-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: JAMES LOFTIN TITLE: DIRECTOR ADDRESS: 715 GLEN EAGLE DR CITY/ST/ZIP/CO: WINTER SPRINGS, FL 32708-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: MATTHEW WINN TITLE: DIRECTOR ADDRESS: 5308 HUNTINGWOOD COURT CITY/ST/ZIP/CO: SARASOTA, FL 34235-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
<u>/s/ STEVE MILLER</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>STEVE MILLER, S/D</u> PRINTED NAME AND CORPORATE TITLE	<u>4/28/2011</u> DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		