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FILED

Mar 10 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000001986 (9)

1. Corporation Name

HAREN CONSTRUCTION COMPANY, INC.

Principal Place of Business

1715 HWY. 411, NORTH
ETOWAH TN 37331

Mailing Address

P.O. BOX 350
ETOWAH TN 37331-0350



3. Date Incorporated or Qualified

04/27/1993

3a. Date of Last Report

02/01/1996

4. FEI Number

62-1077437

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BENNETT, JULIAN ESQ.
112 E. THIRD COURT
PANAMA CITY FL 32402

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

X N/A

(NOTE: Registered Agent signature required when reinstating)

X

N/A

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CEOC	<input type="checkbox"/> DELETE
NAME	HAREN, FRANK E SR.	
STREET ADDRESS	145 COUNTY ROAD 529	
CITY- ST- ZIP	ETOWAH TN	
TITLE	P	<input type="checkbox"/> DELETE
NAME	HAREN, FRANK E JR.	
STREET ADDRESS	136 COUNTY ROAD 529	
CITY- ST- ZIP	ETOWAH TN	
TITLE	S	<input type="checkbox"/> DELETE
NAME	BERRY, DANIEL L	
STREET ADDRESS	1073 WHITE OAK AVE	
CITY- ST- ZIP	MARYVILLE FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	FONTENOT, FRAN R	
STREET ADDRESS	561 COUNTY ROAD 500	
CITY- ST- ZIP	ENGLEWOOD TN	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Vice President
3.3 STREET ADDRESS	Berry, Daniel L.
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Secretary
5.3 STREET ADDRESS	Andrew R. Haren
5.4 CITY- ST- ZIP	145 CR 529
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	ETOWAH, TN 37331
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Frank E. Haren, Jr.

Date

11/6/97

Daytime Phone #

423-263-

0477597 5561

CR2E034 (9/96)