FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # F94000004212 (6)

HARPER ELECTRIC CONSTRUCTION INCORPORATED

Principal Place of Business Mailing Address P.O. BOX 698 P.O. BOX 698 ANDALUSIA AL 36420 ANDALUSIA AL 36420-0698 3. Date Incorporated or Qualified 3a. Date of Last Report 08/15/1994 04/24/1996 2. Principal Place of Business 2a. Mailing Address 4 FELNumber Applied For 63-0779394 Not Applicable Suite, Apt. #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Country Country 8. This corporation has liability for intangible tax under s. 199,032, 25 Yes X No 29 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WHITFIELD, CLARENCE Name 623 FORTE ST. 82 Street Address (P.O. Box Number is Not Acceptable) MILTON FL 32570 83 City 65 Zip Code 11. Furstiant 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. Security of typestical protect run it of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition 1.1 TITLE TITLE HARPER, RICHARD C 1.2 NAME RT 7 BOX 266 STREET ADDRESS 1.3 STREET ADDRESS ANDALUSIA AL 36420 1.4 CITY-ST-ZIP CHY-SI-ZIP Addition DELETE 2 1 TITLE Change HARPER, DIANE P 2.2 NAME NAME RT 7 BOX 266 2.3 STREET ADDRESS STREET ADDRESS ANDALUSIA AL 36420 CHY-ST ZIE 2 4 CITY-ST-ZIP DELETE Change Addition 3.1 THILE THEFE HARPER, JOHNNY F 3.2 NAME A 235-P.O. BOX 1673 (MOORE RD) 33 STREET ADDRESS STREET ADDRESS ANDALUSIA AL 36420 3.4. CITY-ST-ZIP Olly St-7-2 DELETE Change Addition 4.1 TITLE MAUGHON, CHARLOTTE H NAME 4. 2 NAME 113 FUQUA CT. 4.3 STREET ADDRESS STREET ADDRESS ANDALUSIA AL 36420 4.4 CITY-ST-ZIP CHY-SI-ZIP DELETE Change ☐ Addition THLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 001Y-51-20F DELETE ___ Addition HILLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY ST-769 6.4 City-ST-ZIP

SIGNATURE:

Charlette Maughon CHARLOTTE MAUGHON AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SECRETARY

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 have 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

4/25/97

334 222 7022

FILED

May 01 1997 8:00am

Secretary of State

Daytine Phone #

0476649