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FILED

Jan 22 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 # F95000001576 (6)

1. Corporation Name

HARPER CONSTRUCTION, INC.

Principal Place of Business

107-B SOUTHSIDE SQUARE  
SHELBYVILLE IN 37160

Mailing Address

PSOT OFFICE BOX 708  
SHELBYVILLE TN 37160-0708  
US



3. Date Incorporated or Qualified

04/03/1995

3a. Date of Last Report

02/14/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 P. O. Box 708

27 Suite, Apt. #, etc.

28 City & State

Shelbyville, TN

29 Zip

30 Country

37162

USA

4. FEI Number

61-0712651

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

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEMS  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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

Signature of Registered Agent or Officer of the Corporation

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	NEWTON, ROBERT R	
STREET ADDRESS	1404 WEST LANE STREET	
CITY - ST - ZIP	SHELBYVILLE TN	
TITLE	V	<input type="checkbox"/> DELETE
NAME	REED, BENNY	
STREET ADDRESS	1437 GEORGETOWN LANE	
CITY - ST - ZIP	MURFREESBORO TN	
TITLE	S	<input type="checkbox"/> DELETE
NAME	YOUNGBLOOD, PEGGY	
STREET ADDRESS	1018 UNION STREET	
CITY - ST - ZIP	SHELBYVILLE TN	
TITLE	VTCD	<input type="checkbox"/> DELETE
NAME	HARPER, J T	
STREET ADDRESS	4141 BUCKNESS LANE	
CITY - ST - ZIP	PADUCAH KY	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SHUEMAKER, MARGEE	
STREET ADDRESS	133 KRISTEN COVE STREET	
CITY - ST - ZIP	PADUCAH KY	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	VTCD
13 STREET ADDRESS	HARPER, J T
14 CITY - ST - ZIP	616 NORTHVIEW, PADUCAH, KY 42001
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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:

*Robert R. Newton*  
ROBERT R. NEWTON, PRESIDENT

1/8/97

615-684-4563

Date

Daytime Phone #

CR2E034 (9/96)