

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006226

FILED
Mar 27, 2009
Secretary of State

Entity Name: COOPER'S STEEL FABRICATORS, INC.

Current Principal Place of Business:

503 NORTH HILLCREST DR.
SHELBYVILLE, TN 37160

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 149
SHELBYVILLE, TN 371620149

New Mailing Address:

P.O. BOX 149
SHELBYVILLE, TN 37162

FEI Number: 62-1040167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COOPER, J. KENNETH
Address: P.O. BOX 149
City-St-Zip: SHELBYVILLE, TN 371620149

Title: V () Delete
Name: COOPER, GARY K
Address: P.O. BOX 149
City-St-Zip: SHELBYVILLE, TN 371620149

Title: S () Delete
Name: COOPER, FAYE W
Address: P.O. BOX 149
City-St-Zip: SHELBYVILLE, TN 371620149

Title: T () Delete
Name: COOPER, BARRY D
Address: P.O. BOX 149
City-St-Zip: SHELBYVILLE, TN 371620149

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARRY D. COOPER

TREA

03/27/2009

Electronic Signature of Signing Officer or Director

_____ Date