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 # J34055

(0)

HARPER REALTY AND DEVELOPMENT COMPANY, INC. Principal Place of Business Mailing Address Nobert F. Harper III PO BOX 2627 1420 SOUTH FLORIDA AVENUE 1420 SOUTH FLORIDA AVENUE LAKELAND FL 33903 LAKELAND FL 33906-2627			ENUE		
		US		3. Date Incorporated or Qualified 09/19/1986	3a. Date of Last Report 05/01/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-2720687	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<u> </u>	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	7 _{IP}	Country	Trust Fund Contribution 8. This corporation has liability for it	Added to Fees
24	25	29	30		Yes No
	9. Name and Address of Curre			10. Name and Address of New Re	sistered Agent
	PER, ROBERT F. III		81 Name		
	SCOTT LAKE RD		82 Street Add	ress (P.O. Box Number is Not Acceptab	le)
	WEST WHITE OAK DRIVE		83		
LAND	ELAND FL 33813				· · · · · · · · · · · · · · · · · · ·
			84 City		FL 85 Zip Code
SIGNATURE	Signature, typed or printed name of registered a		16 Registered Agent signature requi	poration submits this statement for the p tion's board of directors. I hereby accep med when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE
TITLE	HARPER, ROBERT F. III	ריין מברבוב	1.1 TITLE 1,2 NAME		☐ Change ☐ Adordon
STREET ADDRESS	5508 SCOTT LAKE RD		1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL		1.4 CITY - S1 - ZIP		
FITLE	SD	☐ DELETE	2.1 TITLE		Change Addition
NAME	HARPER, AMY D		2.2 NAME		
STREET ADDRESS	5508 SCOTT LAKE RD		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	LAKELAND FL	DELETÉ	2 4 CITY - ST - ZIP 3 1 TITLE		Change Addition
NAME		Detecti	3.2 NAME		ET change ET Mandou
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY- ST - 7IP		
TITLE		DELETE	4.1 1ITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STHEET ADDRESS		
CITY-ST-ZIP		D OFFICE	4.4 CITY-\$1-7IP		□ 01 □ 1466
TITLE		L_J DELETE	5.1 THUE		Change Addition
NAME STREET ADORESS			5.2 NAME 5.3 STHEET ADDRESS		
CITY-ST-ZIP			5.4 CRY-S1-ZIP		
TITLE	The state of the s	☐ DELETE	61 INLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		4 4 4 2 2	6.4 CITY-ST-7IP		
informatio	in indicated on this annual report or	supplemental annual report is:	true and accurate and tha	d in Section 119.07(3)(i), Florida Statutes it my signature sha!l have the same lega art as required by Chapter 607, Florida S	l effect as if made under eath; that

FILED

May 13 1997 8:00am

Secretary of State