


FILED
Mar 06, 1999 8:00 am
Secretary of State

03-06-1999 90106 017 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J42068

1. Corporation Name

COOPER CONSTRUCTION SERVICES, INC.

Principal Place of Business

1401 MINNESOTA AVE.
LYNN HAVEN FL 32444
US

Mailing Address

PO BOX 33
LYNN HAVEN FL 32444
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/05/1986

2. Principal Place of Business

21
Suite, Apt. #, etc.
22
City & State
23
Zip Country
24
25

2a. Mailing Address

26
Suite, Apt. #, etc.
27
City & State
28
Zip Country
29
30

4. FEI Number

59-2740813

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 owes the current year Intangible Personal Property Tax.

☒ Yes☐ No

9. Name and Address of Current Registered Agent

COOPER, RAY A.
539 BUNKER COVE RD
PANAMA CITY FL 32401

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
PD
COOPER, RAY A.
537 BUNKERS COVE ROAD
PANAMA CITY FL
TITLE ☐ DELETE
D
COOPER, JOYCE H.
537 BUNKERS COVE ROAD
PANAMA CITY FL
TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

TITLE ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:


RAY COOPER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-24-99

Date

(850) 265-6662

Daytime Phone #

CR2E034 (11/98)