

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002670

FILED
Apr 20, 2004
Secretary of State

Entity Name: HARPER MECHANICAL LLC

Current Principal Place of Business:

5401 BENCHMARK LN
SANFORD, FL 32773 US

New Principal Place of Business:

Current Mailing Address:

ONE NORTSHORE CENTER
12 FEDERAL ST
PITTSBURGH, PA 15212 US

New Mailing Address:

FEI Number: 16-1622731 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: MONTGOMERY, CRAIG
Address: 5401 BENCHMARK LANE
City-St-Zip: SANFORD, FL 32773

Title: MGR () Delete
Name: DELBRIDGE, SCOTT
Address: 5401 BENCHMARK LANE
City-St-Zip: SANFORD, FL 32773

Title: MGR () Delete
Name: MOORE, RUSSELL
Address: 5401 BENCHMARK LANE
City-St-Zip: SANFORD, FL 32773

Title: MGR () Delete
Name: HRABIK, JOSEPH A
Address: ONE NORTSHORE CENTER
City-St-Zip: PITTSBURGH, PA 15212

Title: MGR () Delete
Name: FLECK, JAMES L
Address: ONE ORTHSHORE CENTER
City-St-Zip: PITTSBURGH, PA 15212

Title: MGR (X) Delete
Name: BAUMGARDNER, VIRGINIA
Address: ONE NORTSHORE CENTER
City-St-Zip: PITTSBURGH, PA 15212 US

ADDITIONS/CHANGES:

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
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City-St-Zip:

Title: () Change () Addition
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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 for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOSEPH A. HRABIK

MGR

04/20/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date