

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000111177

**FILED**  
**Apr 04, 2012**  
**Secretary of State**

**Entity Name:** TOM HARPER PHOTOGRAPHY, INC.

**Current Principal Place of Business:**

321 FOX RUN DR  
BLUE RIDGE, GA 30513 00

**New Principal Place of Business:**

**Current Mailing Address:**

321 FOX RUN DR  
BLUE RIDGE, GA 30513 00

**New Mailing Address:**

**FEI Number:** 74-3065544

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARPER, THOMAS L JR  
321 FOX RUN DR  
BLUE RIDGE, FL 30513 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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: HARPER, THOMAS L JR  
Address: 321 FOX RUN DR  
City-St-Zip: BLUE RIDGE, GA 30513

Title: DV  
Name: HARPER, DONNA L  
Address: 321 FOX RUN DR  
City-St-Zip: BLUE RIDGE, GA 30513

I hereby 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 all other like empowered.

SIGNATURE: THOMAS LEE HARPER

TH

04/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date