

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000137972

FILED
Feb 11, 2009
Secretary of State

Entity Name: CLAUDE HARPE CONSTRUCTION SERVICES, INC.

Current Principal Place of Business:

7505 NW 131 ST
GAINESVILLE, FL 32653

New Principal Place of Business:

Current Mailing Address:

PO BOX 358242
GAINESVILLE, FL 32635

New Mailing Address:

FEI Number: 20-0418220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22 ST 4 FLR
MIAMI, FL 33145 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: DPST () Delete
Name: HARPE, CLAUDE
Address: 7505 NW 131 ST
City-St-Zip: GAINESVILLE, FL 32653

Title: V () Delete
Name: HARPE, CLAUDE EVERETT III
Address: 7505 NW 131 ST
City-St-Zip: GAINESVILLE, FL 32653

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CLAUDE HARPE

DPST

02/11/2009

Electronic Signature of Signing Officer or Director

Date