## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## May 12, 2008 08:00 AN Secretary of State **DOCUMENT # P03000140638** PAUL HARPER CONSTRUCTION, INC. Principal Place of Business Mailing Address 115 JOHNS ROAD 115 JOHNS ROAD PALATKA, FL 32177 PALATKA, FL 32177 03132008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 90-0130831 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HARPER, PAUL A DO NOT WRITE 115 JOHNS ROAD PALATKA, FL 32177 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. the obligations registered agelet. (NOTE: Registered Agent signature required when reinstating) U000000950738 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 06/04/08-80003-018 150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE HARPER, PAUL A NAME STREET ADDRESS 115 JOHNS ROAD CITY-ST-ZIP PALATKA, FL 32177 TITLE HARPER, PAUL A NAME STREET ADDRESS 115 JOHNS ROAD CITY-ST-ZIP PALATKA, FL 32177 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 1

NAME STREET ADDRESS CITY-ST-ZIP

FILED