2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Mar 04, 2009
Secretary of State

DOCUMENT# P04000040382

Entity Name: HARPER AUTO SALES, INC.

Current Principal Place of Business:

1145 E ROSE ST
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

1868 KINSMAN WAY
LAKELAND, FL 33809

New Mailing Address:

FEI Number: 34-1981261 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARPER, LUCINDA L
1868 KINSMAN WAY
LAKELAND, FL 33809 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: D ( ) Delete
Name: HARPER, LUCINDA L
Address: 1868 KINSMAN WAY
City-St-Zip: LAKELAND, FL 33809

Title: P ( ) Delete
Name: HARPER, LUCINDA L
Address: 1868 KINSMAN WAY
City-St-Zip: LAKELAND, FL 33089

Title: T ( ) Delete
Name: HARPER, LUCINDA L
Address: 1868 KINSMAN WAY
City-St-Zip: LAKELAND, FL 33809

Title: S ( ) Delete
Name: HARPER, BLANCHARD S JR.
Address: 1868 KINSMAN WAY
City-St-Zip: LAKELAND, FL 33809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: S (X) Change ( ) Addition
Name: HARPER, LUCINDA L
Address: 1868 KINSMAN WAY
City-St-Zip: LAKELAND, FL 33809

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: LUCINDA HARPER P 03/04/2009

Electronic Signature of Signing Officer or Director — Date