

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Mar 23 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
------------------------------------------------	-----------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------

DOCUMENT # P95000080547 (9)

1. Corporation Name

COOPER CONSTRUCTION, INC.

Principal Place of Business

115 112TH AVENUE NORTH #911  
ST. PETERSBURG FL 33716

Mailing Address

115 112TH AVENUE NORTH #911  
ST. PETERSBURG FL 33716

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	10/16/1995	
22	City & State	27	City & State	4. FEI Number	
23	Zip	28	Zip	59-3345056	
24	Country	29	Country	Applied For	
25		30		Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

COOPER, DARREN J

~~115 112TH AVENUE NORTH #911~~

~~ST. PETERSBURG FL 33716~~

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1550 MCMULLEN BOOTH RD. N.

83

BOX 225

84 City

CLEARWATER

FL

85

Zip Code

33759

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME COOPER, LEIGH R

STREET ADDRESS ~~115 112TH AVENUE NORTH #911~~

CITY - ST - ZIP ~~ST. PETERSBURG FL 33716~~

1.2 TITLE ☐ DELETE

NAME COOPER, DARREN J

STREET ADDRESS ~~115 112TH AVENUE NORTH #911~~

CITY - ST - ZIP ~~ST. PETERSBURG FL 33716~~

1.3 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

1.4 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

1.5 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

1.6 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

1.7 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

1.8 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

1.9 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 1550 MCMULLEN BOOTH RD BOX 225

1.4 CITY - ST - ZIP CLEARWATER, FL. 33759

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 1550 MCMULLEN BOOTH RD BOX 225

2.4 CITY - ST - ZIP CLEARWATER, FL. 33759

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/98

(813) 524-2408

CR2E034 (10/97)