

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001307

Entity Name: DAVID E. LOOPER & COMPANY, INC.

Current Principal Place of Business:

320 15TH STREET SE
HICKORY, NC 28602

Current Mailing Address:

PO BOX 3224
HICKORY, NC 28603

FEI Number: 56-1822600

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

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: GLORIA NASH, ASST. VICE PRESIDENT

02/23/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO, TREASURER
Name LOOPER, DAVID E
Address 58 MURRAY BOULEVARD
City-State-Zip: CHARLESTON SC 29413

Title S
Name LINGLE, LISA
Address 9403 WESTRIDGE DRIVE
City-State-Zip: HICKORY NC 28601

Title PRESIDENT
Name YOUNG, CHARLES R JR.
Address 825 2ND STREET NW
City-State-Zip: HICKORY NC 28601

Title EXECUTIVE VICE PRESIDENT
Name WALKER, BRIAN E MR
Address 1552 YORK INSTITUTE ROAD
City-State-Zip: HIDDENITE NC 28636

Title VP
Name ROWE, DEVIN C MR
Address 6902 GRACIE LANE
City-State-Zip: VALE NC 28168

Title CFO
Name MAUNEY, CAMERON
Address PO BOX 3224
City-State-Zip: HICKORY NC 28603

Title VP
Name RAINEY, JASON
Address PO BOX 3224
City-State-Zip: HICKORY NC 28603

Title VP
Name WINTERS, MATTHEW
Address PO BOX 3224
City-State-Zip: HICKORY NC 28603

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: LISA P LINGLE

SECRETARY

02/23/2024

Electronic Signature of Signing Officer/Director Detail

Date