

2020 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# H52793

Entity Name: PICERNE CONSTRUCTION CORPORATION**Current Principal Place of Business:**247 N. WESTMONTE DR
ALTAMONTE SPRINGS, FL 32714**Current Mailing Address:**247 N. WESTMONTE DR
ALTAMONTE SPRINGS, FL 32714 US**FEI Number:** 59-2557383**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FILDES, RICHARD J.
215 N EOLA DR
ORLANDO, FL 32801 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	VP
Name	PASCONI, GARY
Address	247 N. WESTMONTE DR
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	TREASURER/CFO, SECRETARY
Name	HEFLINGER, JAN
Address	247 N. WESTMONTE DR
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	VP
Name	WERNECKE, EDWARD
Address	247 N. WESTMONTE DR
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	VP
Name	HADLEY, ROBERT G. JR.
Address	247 N. WESTMONTE DR
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	PRESIDENT, CEO
Name	PICERNE, DAVID
Address	247 N. WESTMONTE DR
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	VP
Name	HALEY, RICHARD
Address	247 N. WESTMONTE DR
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

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: JAN C HEFLINGER**SECRETARY****12/02/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date