

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000010812

Entity Name: PIGEON & SONS ENTERPRISES, INC.**Current Principal Place of Business:**7855 S. MAGNOLIA AVENUE
OCALA, FL 34476**Current Mailing Address:**7855 S. MAGNOLIA AVENUE
OCALA, FL 34476 US**FEI Number: 26-1890218****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PIGEON, CHUCK A
7855 S. MAGNOLIA AVENUE
OCALA, FL 34476 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	PRESIDENT
Name	PIGEON, CHUCK A
Address	7855 S. MAGNOLIA AVENUE
City-State-Zip:	OCALA FL 34476

Title	SECRETARY, TREASURER
Name	PIGEON, LINDA R
Address	7855 S. MAGNOLIA AVENUE
City-State-Zip:	OCALA FL 34476

Title	DIRECTOR
Name	PIGEON, ANDREW PAUL
Address	7855 S. MAGNOLIA AVENUE
City-State-Zip:	OCALA FL 34476

Title	DIRECTOR
Name	PIGEON, CHESTER DAVID
Address	7855 S. MAGNOLIA AVENUE
City-State-Zip:	OCALA FL 34476

Title	DIRECTOR
Name	PIGEON, TIMOTHY CHUCK
Address	7855 S. MAGNOLIA AVENUE
City-State-Zip:	OCALA FL 34476

Title	DIRECTOR
Name	PIGEON, JACOB LARSON
Address	7855 S. MAGNOLIA AVENUE
City-State-Zip:	OCALA FL 34476

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: CHUCK A. PIGEON**PRESIDENT****02/11/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date