

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90329 003 ***150.00

DOCUMENT # 455784

1. Entity Name
PEAVY & SON CONSTRUCTION CO., INC.



Principal Place of Business
**39 SCHWALL RD.
HAVANA, FL 32333**

Mailing Address
**PO BOX 2369
HAVANA, FL 32333**

50010374



03302006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1576957

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PEAVY, M D III
39 SCHWALL RD.
HAVANA, FL 32333**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PEAVY, MAGNUS D III 8906 FL-GA HWY. HAVANA, FL 32333
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PEAVY, MAGNUS D JR. RT 4 BOX 2160 HAVANA, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V PEAVY, MAGNUS IV 45 MONOCOUPÉ CIRCLE PANACEA, FL 32346
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S MASON, WAYNE R 1647 EAGLES LANDING BLVD #2 TALLAHASSEE, FL 32308
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Wayne Mason
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/06
Date

(850) 539-5019
Daytime Phone #