

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

2-1-95 6-976-C
CORPORATION
ANNUAL REPORT
1995

 **FLORIDA DEPARTMENT OF STATE**
Sandra B. Norham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -7 PM 4:23

DOCUMENT # 552336 (0)

1. Corporation Name
K. HERRON & SONS CONCRETE CONSTRUCTION CO., INC.

Principal Place of Business Mailing Address
11450 S.W. 17TH STREET 11450 S.W. 17TH STREET
DAVIE FL 33325 DAVIE FL 33325

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **12/01/1977** 3a. Date of Last Report **02/09/1994**

4. FEI Number **59-1779616** Applied For ☐ Not Applicable ☐

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

6. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

HERRON, KENNETH
11450 S.W. 17TH STREET
DAVIE FL 33325

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

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 resigning) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	1.1 TITLE	☐ Change ☐ Addition
NAME	HERRON, KENNETH	1.2 NAME	
STREET ADDRESS	11450 S.W. 17TH ST	1.3 STREET ADDRESS	
CITY- ST- ZIP	DAVIE FL	1.4 CITY- ST- ZIP	
TITLE	P	2.1 TITLE	☐ Change ☐ Addition
NAME	HERRON, CAROL	2.2 NAME	
STREET ADDRESS	11450 S.W. 17TH ST	2.3 STREET ADDRESS	
CITY- ST- ZIP	DAVIE FL	2.4 CITY- ST- ZIP	
TITLE	VP	3.1 TITLE	☐ Change ☐ Addition
NAME	HERRON, KENNETH II	3.2 NAME	
STREET ADDRESS	1700 SW 115TH AVE.	3.3 STREET ADDRESS	
CITY- ST- ZIP	DAVIE FL	3.4 CITY- ST- ZIP	
TITLE	T	4.1 TITLE	☐ Change ☐ Addition
NAME	HERRON-SKINNER, CAROLINE	4.2 NAME	
STREET ADDRESS	1900 SW 115TH AVE.	4.3 STREET ADDRESS	
CITY- ST- ZIP	DAVIE FL	4.4 CITY- ST- ZIP	
TITLE	S	5.1 TITLE	☐ Change ☐ Addition
NAME	HERRON, GLENNADEE	5.2 NAME	
STREET ADDRESS	1700 SW 115TH AVE.	5.3 STREET ADDRESS	
CITY- ST- ZIP	DAVIE FL	5.4 CITY- ST- ZIP	
TITLE	V	6.1 TITLE	☐ Change ☐ Addition
NAME	HERRON, CLAY BOY	6.2 NAME	
STREET ADDRESS	11450 SW 17TH STREET	6.3 STREET ADDRESS	
CITY- ST- ZIP	DAVIE FL	6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 resolver 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 addition.

SIGNATURE: Glennadee Herron **Glennadee Herron** 2-1-95 305-472-6811
 (Signature and typed or printed name of signing officer or director) Date Day/Month/Year