

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 06, 2006 08:00 AM
Secretary of State

DOCUMENT # F04000006878

1. Entity Name
VEC SYSTEMS, INC.



Principal Place of Business
**977 TIBBETTS-WICK ROAD
GIRARD, OH 44420**

Mailing Address
**977 TIBBETTS-WICK ROAD
GIRARD, OH 44420**

DO NOT WRITE IN THIS SPACE



01062006 No Chg-F CR2ED34 (11/05)

4. FEI Number
04-0702089

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FERRY, REX A
4021 GULF SHORE BLVD., N.
BRITTANY UNIT #605
NAPLES, FL 34103-2232**

**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]*

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

(NOTE: Registered Agent signature required when reinstating)

1-11-2006

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
**CPT
FERRY, REX A
977 TIBBETTS-WICK ROAD
GIRARD, OH 44420**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
YOCUM, BRADLEY D
977 TIBBETTS-WICK ROAD
GIRARD, OH 44420**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DS
AMES, KEVIN
977 TIBBETTS-WICK ROAD
GIRARD, OH 44420**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**000000458553
03/17/06-80050-009 150.00**

**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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-11-06

DATE

330-539-4044

DAYTIME PHONE #