

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Shirley B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G14255** (5)

1. Corporation Name
VEDA-MULE, INC.



Principal Place of Business

**% D. TURNER MATTHEWS
519 13TH STREET WEST
BRADENTON FL 34205**

Mailing Address

**% D. TURNER MATTHEWS
519 13TH STREET WEST
BRADENTON FL 34205**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt., etc.

22

City & State

23

Zip

Country

24

26

Suite, Apt., etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**MULOCK, EDWIN T.
519 13TH STREET WEST
BRADENTON FL 34205**

3. Date Incorporated or Qualified
12/21/1982

3a. Date of Last Report
08/03/1995

4. FID Number
59-2248733

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

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 602.0902 and 602.1726, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered officer or registered agent, or both, in the State of Florida. Such change is 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 602.0904, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Officer or Director

Signature of Registered Agent or Officer or Director

Date

12. OFFICERS AND DIRECTORS

1. TITLE	DPV	☐ DELETE
2. NAME	MULOCK, EDWIN T	
3. STREET ADDRESS	519 13TH ST WEST	
4. CITY, ST, ZIP	BRADENTON, FL 00000	
5. TITLE	DST	☐ DELETE
6. NAME	MATTHEWS, D TURNER	
7. STREET ADDRESS	519 13TH ST WEST	
8. CITY, ST, ZIP	BRADENTON, FL 00000	
9. TITLE		☐ DELETE
10. NAME		
11. STREET ADDRESS		
12. CITY, ST, ZIP		
13. TITLE		☐ DELETE
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE		☐ DELETE
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is a true and correct copy of the information required by law. I further certify that the information is true and correct and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the registered agent or business manager of the corporation and I am responsible for the report as required by Chapter 602, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report. I am an officer or director of the corporation.

SIGNATURE:

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edwin T. Mulock

1/15/96

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