FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996 5-28-96 B-66604 ...

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

DOCUMENT # K08182 (3)

1. Corporation Name

VEON & SONS CONSTRUCTION, INC.

Principal Place of Business

1400 BISHOP ESTATES RD.
JACKSONVILLE FL 32259
US

Mailing Address

1400 BISHOP ESTATES RD.
JACKSONVILLE FL 32259
US

3. Date Incorporated or Qualified: 12/21/1987
3a. Date of Last Report: 05/10/1995
4. FEI Number: 59-2859126 ☐ 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

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

9. Name and Address of Current Registered Agent

VEON, VIRGINIA
283 ORANGE AVENUE
JACKSONVILLE FL 32259

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 reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	V	☐ DELETE
NAME	VEON, FRANCIS E	
STREET ADDRESS	283 ORANGE AVENUE	
CITY-ST-ZIP	JACKSONVILLE FL 32259	
TITLE	P	☐ DELETE
NAME	VEON, VIRGINIA	
STREET ADDRESS	283 ORANGE AVENUE	
CITY-ST-ZIP	JACKSONVILLE FL 32259	
TITLE	V	☐ DELETE
NAME	VEON, TROY D.	
STREET ADDRESS	2946 CAMPBELL RD.	
CITY-ST-ZIP	MIDDLEBURG FL	
TITLE	ST	☐ DELETE
NAME	VEON, ROBERT E.	
STREET ADDRESS	12560 KNOTEH RD.	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	☑ Change ☐ Addition
1.2 NAME	Francis D. Veon	
1.3 STREET ADDRESS	283 Orange Avenue	
1.4 CITY-ST-ZIP	Jacksonville, FL. 32259	
2.1 TITLE	V	☑ Change ☐ Addition
2.2 NAME	Virginia Veon	
2.3 STREET ADDRESS	283 Orange Avenue	
2.4 CITY-ST-ZIP	Jacksonville, FL. 32259	
3.1 TITLE		☐ Change ☑ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP	← Zip 32068	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS	← Knotah misspelled	
4.4 CITY-ST-ZIP	Zip 32258	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
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)(k), 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 receiver 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 address.

SIGNATURE: X Francis D. Veon — 5-21-96 — 904-287-3181

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR · Date · Daytime Phone #

CR2E034 (12/95)