

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K08182

1. Corporation Name

Veon and Sons Construction, Inc.

Principal Place of Business

5049 Highway 17 S
Green Cove Springs, FL
32043

Mailing Address

5049 Highway 17 South
Green Cove Springs, FL
32043

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/21/1987

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 owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

Francis D. Veon Jr.
5049 Highway 17 South
Green Cove Springs, FL 32043

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 VP
NAME Veon, Virginia
STREET ADDRESS 5284 Highway 17 South
CITY-ST-ZIP Green Cove Springs, FL 32043

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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 VP
1.2 NAME Robert E. Veon
1.3 STREET ADDRESS 5292 Highway 17 South
1.4 CITY-ST-ZIP Green Cove Springs, FL 32043

2.1 TITLE SEC/Treasure ☐ Change ☒ Addition

2.2 NAME Thomas A. Coon

2.3 STREET ADDRESS 1008 Confederate Court

2.4 CITY-ST-ZIP Green Cove Springs, FL 32043

3.1 TITLE President ☐ Change ☒ Addition

3.2 NAME FRANCIS D. VEON JR

3.3 STREET ADDRESS 5049 Highway 17 South

3.4 CITY-ST-ZIP Green Cove Springs, FL 32043

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

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 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Francis D. Veon Jr.

August 19, 1999

Date

Daytime Phone #

Amended # 61.25

99 SEP -9 PM 3:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2ED34 (11/98)