

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P14047** (5)

1. Corporation Name

VEPCO MANAGEMENT, INC.



Principal Place of Business

**360 S SHORE DR
SARASOTA FL 34234
US**

Mailing Address

**360 S SHORE DR
SARASOTA FL 34234
US**

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**PIKE VERNON E
360 S SHORE DR
SARASOTA FL 34234**

3. Date Incorporated or Qualified

04/15/1987

3a. Date of Last Report

03/06/1995

4. FEI Number

51-0288194

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 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

Signature typed or printed in block, last name first (P.O. Box Number is Not Acceptable)

Date (P.O. Box Number is Not Acceptable)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PTD	☐ DELETE
NAME	PIKE, VERNON E.	
STREET ADDRESS	4141 CLARK ROAD	
CITY, ST, ZIP	SARASOTA FL	
TITLE	V	☐ DELETE
NAME	PIKE, GREGORY M.	
STREET ADDRESS	4141 CLARK ROAD	
CITY, ST, ZIP	SARASOTA FL	
TITLE	V	☒ DELETE
NAME	KRAMER, JAMES	
STREET ADDRESS	P.O. BOX 218	
CITY, ST, ZIP	CAMDEN DE	
TITLE	S	☐ DELETE
NAME	PIKE, LELA A.	
STREET ADDRESS	4141 CLARK ROAD	
CITY, ST, ZIP	SARASOTA FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

TITLE	PTD	☒ Change ☐ Addition
NAME	PIKE, VERNON E.	
STREET ADDRESS	360 SO. SHORE DRIVE	
CITY, ST, ZIP	SARASOTA, FLORIDA 34234	
TITLE	S	☒ Change ☐ Addition
NAME	PIKE, GREGORY M.	
STREET ADDRESS	360 SO. SHORE DRIVE	
CITY, ST, ZIP	SARASOTA, FLORIDA 34234	☐ Change ☐ Addition
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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)(a), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vernon E. Pike

1-7-96

9A-3556388

CR2E034 (12/95)