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**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000076561 (8)

VERO CONTROL SYSTEMS, INC.

Principal Place of Business Mailing Address 1163 19TH STREET P.O. BOX 6036 VERO BEACH FL 32961 VERO BEACH FL 32961

## FILED May 05 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/29/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3218136 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. X Yes □ No 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HAINES, WARD L **1163 19TH STREET** 82 Street Address (P.O. Box Number is Not Acceptable) VERO BEACH FL 32961 **B3** City 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition TITLE 11 TITLE HAINES, WARD L 1.2 NAME NAME BI PINE ARBOR LANE \$ 106 <del>i vista palm lane #207</del> STREET ADD 1.3 STREET ADDRESS VERO BCH FL CITY-ST-ZIP 1.4 CiTY-ST-ZIP VERO BEWEY, FL 32962 DELETE Change Addition TITLE 21 TITLE **GULLEY, RANDEL** NAME 2.2 NAME 1830 FLORA LANE STREET ADDRESS 2.3 STREET ADDRESS **VERO BCH FL** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STHEET ADDRESS CITY-ST-ZIP 4.4 City-St-7/P DELETE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 City-St-ZiP DELETE Change \_\_ Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 of state 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 an address. an address.