

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000022536

1. Corporation Name

VDL Industries, Inc.

Principal Place of Business

4121 C.R. 305

Mailing Address

P.O. Box 1028
Bunnell, Fl. 32110

3. Date Incorporated or Qualified

March 8, 1996

3a. Date of Last Report

N/A

4. FEI Number

59-3373271

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 4121 C.R. 305

2a. Mailing Address

26 P.O. Box 1028

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 Bunnell, Fl.

27 City & State

28 Bunnell, Fl.

24 Zip

32110

Country

25 Flagler

Zip

29 32110

Country

30 Flagler

9. Name and Address of Current Registered Agent

Glenn R. Padgett
1801 W. International Speedway Blvd.
Daytona Beach, Fl. 32114

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, type or print name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating.)

DATE

12. OFFICERS AND DIRECTORS

TITLE	President / Director	<input type="checkbox"/> DELETE
NAME	Vincent H. Hawes, Jr.	
STREET ADDRESS	555 4th St.	
CITY - ST - ZIP	Holly Hill, Fl. 32117	
TITLE	Vice President / Director	<input type="checkbox"/> DELETE
NAME	Gregory Dean Hawes	
STREET ADDRESS	1667 Center St.	
CITY - ST - ZIP	Holly Hill, Fl. 32117	
TITLE	Sec. Treas. / Director	<input type="checkbox"/> DELETE
NAME	Lloyd Hugh Hawes	
STREET ADDRESS	1120 LPGA Blvd.	
CITY - ST - ZIP	Holly Hill, Fl. 32117	
TITLE	Director	<input type="checkbox"/> DELETE
NAME	V. H. Hawes	
STREET ADDRESS	P.O. Box 433, 4121 C.R. 305	
CITY - ST - ZIP	Bunnell, Fl. 32110	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I, the undersigned, 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.

SIGNATURE:

V. H. Hawes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-31-97

Date

904-437-2091

Daytime Phone #

CR2E034 (9/96)