

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 837924

**Entity Name:** H.O. WEAVER & SONS, INC.**Current Principal Place of Business:**7450 HOWELLS FERRY RD.  
MOBILE, AL 36618-3407**Current Mailing Address:**P.O. BOX 8039  
MOBILE, AL 36689-0039 US**FEI Number:** 63-0567634**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LOWREY, JACK L. JR.  
411-I BAYSHORE DRIVE  
PENSACOLA, FL 32507 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** JACK L. LOWREY

01/25/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	VP
Name	WEAVER, MICHAEL P
Address	1305 DUNBROOKE COURT
City-State-Zip:	MOBILE AL 36695

Title	PRESIDENT
Name	WEAVER, PAUL E
Address	240 SUFFOLK RD
City-State-Zip:	MOBILE AL 36608

Title	VP
Name	MURPHY, JOHN E. III
Address	1613 WOODS POINTE CIR
City-State-Zip:	MOBILE AL 36609

Title	VP
Name	WEAVER, RAMONA G
Address	240 SUFFOLK RD
City-State-Zip:	MOBILE AL 36608

Title	VP
Name	TILLERY, R. LEWIS
Address	6126 PHERIN WOODS CRT
City-State-Zip:	MOBILE AL 36608

Title	CFO
Name	KILCREASE, DAVID L
Address	6558 HUNTCLIFF CT
City-State-Zip:	MOBILE AL 36608

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** DAVID KILCREASE

CFO

01/25/2018

Electronic Signature of Signing Officer/Director Detail

Date