

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06067

**Entity Name:** FAULKNER & SONS, INC.

**Current Principal Place of Business:**

12570 ROSELAND RD.  
SEBASTIAN, FL 32978

**FILED**  
**Mar 12, 2014**  
**Secretary of State**  
**CC0516138758**

**Current Mailing Address:**

P.O.BOX 781437  
SEBASTIAN, FL 32978 US

**FEI Number: 59-2059528**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FAULKNER, GARY A  
12570 ROSELAND RD.  
SEBASTIAN, FL 32978 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name FAULKNER, GARY A  
Address 12570 ROSELAND RD.  
City-State-Zip: SEBASTIAN FL 32958

Title S  
Name FAULKNER, TRACY L.  
Address 12570 ROSELAND RD.  
City-State-Zip: SEBASTIAN FL 32958

Title V  
Name FAULKNER, ALLEN H  
Address 333 SW ORANGE AVE  
City-State-Zip: SEBASTIAN FL 32958

Title M  
Name FAULKNER, BRANDON A.  
Address 650 OLEANDER ST.  
City-State-Zip: SEBASTIAN FL 32958

*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: TRACY FAULKNER**

**SECRETARY**

**03/12/2014**

Electronic Signature of Signing Officer/Director Detail

Date