

**2021 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

Commonwealth of Virginia
State Corporation Commission
Office of the Clerk
Entity ID: 05042692
Filing Number: 2105123251868
Filing Date/Time: 05/12/2021 04:51 PM
Effective Date/Time: 05/12/2021 04:51 PM



1. CORPORATION NAME:
EVEREADY CONSTRUCTION INC.

DUE DATE: **06/30/21**

2. VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ATTY.
RICHARD D. PALMIERI
200 SOUTH 10TH STREET, SUITE 1600
P. O. BOX 1320
RICHMOND, VA 23218-1320

SCC ID NO.: **0504269-2**

5. TOTAL NUMBER OF AUTHORIZED
SHARES: 5,000

3. CITY OR COUNTY OF VA REGISTERED OFFICE:
760-RICHMOND CITY

4. STATE OR COUNTRY OF INCORPORATION:
VA-Virginia

DO NOT ATTEMPT TO ALTER THE INFORMATION ABOVE. Carefully read the enclosed instructions. Type or print in black only.

6. PRINCIPAL OFFICE ADDRESS:

<input type="checkbox"/> Mark this box if address shown below is correct	If the block to the left is blank or contains incorrect data please add or correct the address below.
ADDRESS: 10513 KRENMORE LANE CITY/ST/ZIP CHESTER, VA 23831-0000	ADDRESS: <i>16306 CrossFell Place Chesterfield, VA 23832</i> CITY/ST/ZIP

7. DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed.
An individual may be designated as both a director and an officer.

Mark appropriate box unless area below is blank: <input type="checkbox"/> Information is correct <input checked="" type="checkbox"/> Information is incorrect <input type="checkbox"/> Delete information	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below: <input type="checkbox"/> Correction <input type="checkbox"/> Addition <input type="checkbox"/> Replacement
OFFICER <input type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/> NAME: DWIGHT H SNEAD JR TITLE: P/S/T ADDRESS: 10513 KREN MORE LANE CITY/ST/ZIP: CHESTER, VA 23831-0000	OFFICER <input type="checkbox"/> DIRECTOR <input checked="" type="checkbox"/> NAME: <i>DWIGHT H. SNEAD JR</i> TITLE: <i>P/S/T</i> ADDRESS: <i>16306 CROSSFELL PLACE</i> CITY/ST/ZIP: <i>CHESTERFIELD, VA 23832</i>

I affirm that the information contained in this report is accurate and complete as of the date below.

SIGNATURE OF DIRECTOR/OFFICER
LISTED IN THIS REPORT

Dwight Snead Jr. / President
PRINTED NAME AND CORPORATE TITLE

5/5/21
DATE

It is a Class 1 misdemeanor for any person to sign a document that is false in any material respect with intent that the document be delivered to the Commission for filing.

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