

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

FILED
May 20 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 162030 (1)
1. Corporation Name
RINKER MATERIALS CORPORATION

Principal Place of Business 1501 BELVEDERE RD. ATTN: W.J. PAYNE P.O. BOX 24635 (33416) WEST PALM BEACH FL 33406	Mailing Address 1501 BELVEDERE RD. ATTN: W.J. PAYNE P.O. BOX 24635 (33416) WEST PALM BEACH FL 33406-1501
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3. Date Incorporated or Qualified 06/26/1950	3a. Date of Last Report 07/01/1996
4. FEI Number 59-0615531	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	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Zip	30. Country

9. Name and Address of Current Registered Agent

LINLEY, GEORGE W.
1501 BELVEDERE RD
WEST PALM BEACH FL 33406

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. 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)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D/C	1.1 TITLE	☐ Change ☐ Addition
NAME	CLARKE, D.V.	1.2 NAME	
STREET ADDRESS	945 E. PASCES FERRY RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	1.4 CITY-ST-ZIP	
TITLE	DPC	2.1 TITLE	☐ Change ☐ Addition
NAME	SNYDER, W.L.	2.2 NAME	
STREET ADDRESS	1501 BELVEDERE ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	2.4 CITY-ST-ZIP	
TITLE	DV	3.1 TITLE	☐ Change ☐ Addition
NAME	WATSON, K.H.	3.2 NAME	
STREET ADDRESS	1501 BELVEDERE ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	☐ Change ☐ Addition
NAME	STONE, JON	4.2 NAME	
STREET ADDRESS	1501 BELVEDERE RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BCH FL	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	☐ Change ☐ Addition
NAME	KINGSTON, JOHN	5.2 NAME	
STREET ADDRESS	1501 BELVEDERE RD	5.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BCH FL	5.4 CITY-ST-ZIP	
TITLE	STD	6.1 TITLE	☐ Change ☐ Addition
NAME	DAVIS, J R	6.2 NAME	
STREET ADDRESS	1501 BELVEDERE RD	6.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL	6.4 CITY-ST-ZIP	

14. I do 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 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:

[Signature]

5/14/97

(561) 810-8425

CR2E034 (9/96)