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

FILED
Apr 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # 198632 (2)

1. Corporation Name
SINGELTARY CONCRETE PRODUCTS, INC.

Principal Place of Business	Mailing Address
1709 9TH ST. E. P.O. BOX 919 BRADENTON FL 34206	1709 9TH ST. E. P.O. BOX 919 BRADENTON FL 34206

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/28/1956

2. Principal Place of Business	2a. Mailing Address
21 59 Sarasota Ctr. Blvd.	26 59 Sarasota Ctr. Blvd.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 Sarasota, FL	28 Sarasota, FL
24 Zip 34240 / 25 Country USA	29 Zip 34240 / 30 Country USA

4. FEI Number: 59-0788733 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BUCKELEW, RICHARD A 1709 9TH ST. E. BRADENTON FL 34208	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	DURANT, A. S J.		1.2 NAME		
STREET ADDRESS	RMC HOUSE, HIGH ST.		1.3 STREET ADDRESS	One Decatur Town Center	
CITY-ST-ZIP	FELTHAM MI		1.4 CITY-ST-ZIP	150 E. Ponce deLeon Ave. Suite 450 Decatur, GA 30030	
TITLE	D	☒ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	YOUNG, P. L		2.2 NAME		
STREET ADDRESS	RMC HOUSE, HIGH ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	FELTHAM, MIDDLESEX, EN		2.4 CITY-ST-ZIP		
TITLE	TS	☐ DELETE	3.1 TITLE		☒ Change ☐ Addition
NAME	BRUCE, G W		3.2 NAME		
STREET ADDRESS	137 MAPLE ST		3.3 STREET ADDRESS	One Decatur Town Center 150 E. Ponce deLeon Ave. Suite 450	
CITY-ST-ZIP	DECATUR GA		3.4 CITY-ST-ZIP	Decatur, GA 30030	
TITLE	P	☐ DELETE	4.1 TITLE		☒ Change ☐ Addition
NAME	BUCKELEW, RICHARD A.		4.2 NAME		
STREET ADDRESS	1709 9TH ST E		4.3 STREET ADDRESS	59 Sarasota Center Blvd.	
CITY-ST-ZIP	BRADENTON, FL 00000		4.4 CITY-ST-ZIP	Sarasota, FL 34240	
TITLE	ATAS	☐ DELETE	5.1 TITLE		☒ Change ☐ Addition
NAME	BLACK, STEVEN		5.2 NAME		
STREET ADDRESS	1709 9TH ST E		5.3 STREET ADDRESS	59 Sarasota Center Blvd.	
CITY-ST-ZIP	BRADENTON FL		5.4 CITY-ST-ZIP	Sarasota, FL 34240	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (10/97)

14. I 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: by Steven A. Black Financial Controller