

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 219963

FILED  
Jan 08, 2008  
Secretary of State

Entity Name: A. MCBRIDE CONCRETE AND MASONRY, INC.

**Current Principal Place of Business:**

6210 44TH STREET N.  
PINELLAS PARK, FL 33781

**New Principal Place of Business:**

**Current Mailing Address:**

6210 44TH STREET N.  
PINELLAS PARK, FL 33781

**New Mailing Address:**

FEI Number: 59-0866118      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MCBRIDE, GERALD T PSD  
6210 44 STREET N.  
PINELLAS PARK, FL 33781      US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: MCBRIDE, GERALD T PSD  
Address: 555 5TH AVE NE  
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: V ( ) Delete  
Name: MCBRIDE, MARK T V  
Address: 13810 OAK FOREST BLVD,N  
City-St-Zip: SEMINOLE, FL 33776

Title: V ( ) Delete  
Name: MCBRIDE, DONA L V  
Address: 645 SAXONY BLVD.  
City-St-Zip: ST PETERSBURG, FL 33716

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GERALD T. MCBRIDE

PSD

01/08/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date