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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT	#	766	137
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1. Corporation Name

PRECAST CONCRETE STRUCTURES ASSOCIATION OF FLORI DA, INC.

Principal Place of Business 16521 SAN CARLOS BLVD SUITE H ET MYERS EL 33908

Mailing Address

P.O. BOX 08669 FT MYERS FL 33908-0669

FILED Mar 02, 1999 8:00 am Secretary of State

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Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Supplied For Suite, Apt. #, etc. 59-2415781 Not Applicable City & State City & State 5. Certificate of Status Desired San Desiried	US		••							
Suite, Apt. #, etc. Suite, Apt. #, etc. 27	Principal Place of Business 2a. Mailing Address									
City & State 27	21				<u> </u>					
City & State 23		t. #, etc. Suite, Apt. #, etc.								
20 20 20 20 20 20 20 20	22						59-24 15/81			
25	City & Sta	—¬ ·					5. Certificate of Status Desired			
28		Country	Zip	c	ountry		6. Election Campaign Financing	\$5.00	May Be	
10 Name and Address of New Registered Agent 10 Name and Address of New Registered Agent 11 Name 12 Street Address (P.O. Box Number is Not Acceptable) 11 Name 12 Street Address (P.O. Box Number is Not Acceptable) 13 Name 14 Name 15 Nam	24	25	29	30			Trust Fund Contribution Added to Fees			
MCGEE, FRED L 18521 SAN CARLOS BLVD SUITE H FT MYERS FL 33908 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 617.050. Florida Statutes. SIGNATURE Signature Description Descr		9. Name and Address of Curre	nt Registered Agent		\mathbb{I}_{-}		10. Name and Address of New Regis	tered Agent		
16521 SAN CARLOS BLVD 53					81 Name					
16521 SAN CARLOS BLVD 53	MOGER	בסכה ו			RO Charles Address (D.O. Bay Number in Not Accordable)					
SUITE H FT MYERS FL 33908 4 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, a management of the provisions of Sections 617.0502, Florida Statutes, the above-named corporation's board of directors. I hereby accept the approach agent, a management of the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE DOFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS IN 12 TITLE PO DELETE 11.1712 TITLE PO DELETE 11.1712 TITLE PO DELETE 11.1712 TITLE PO DO DELETE 11.1712 TITLE ST DELETE 11.1712 ST DELETE 11.1712 ST DELETE 11.1712 TITLE ST DELETE 11.1712 S					02	Sueer	Addiss (F.O. Box Humber is Not Acceptable)		}	
### City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, 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, and an accept the origination of Section 617.0503, Florida Statutes. SIGNATURE		AN CARLUS BLVD			83					
TILE ST		A 5 11 4 5555				L				
11. Pursuant to the provisions of Sections 917.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing list registered office or registered agent, or both, in the State of Floridas. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Floridas. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Floridas. Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Floridas. Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Floridas. Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Floridas. Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the Statutes, included by the corporation's board of directors. I hereby accept the appointment as registered agent, or both and accept the obligations of Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent, or both appointment as registered agent, or both appointment as registered agent, or both appointment as registered adentical the corporation's board of directors. I hereby accept the appointment as registered agent, or both appointment agent appointment as registered agent, or both appointment agent appointment agent appointment agent appointm	} FTMYER	S FL 33908			84	City		E1 85 Zip	Code	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of intectors. The legy accept the application agent, and accept the obligations of yearhold from of registered agent and their applicable. SIGNATURE Signature, by the product morns of registered agent and their applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE P DELETE 11. TITLE P D DELETE 11. TITLE P D Change Addition KNOTTS, GREG STREETADORESS P.O. BOX 157 N/A 13. STREETADORESS FROM 157 N/A 13. TITLE P D Change Addition Knotts, Greg 13. What Knotts, Greg 13. STREETADORESS FROM 157 N/A 13. STREETADORESS P.O. BOX 157 N/A 13. TITLE P D Change ACADITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITY-ST-ZIP ASTATULA FL 34705 14. CITY-ST-ZIP ASTATULA FL 34705 15. TITLE ST D DELETE 21. TITLE ST D DELETE 22. STREETADORESS 8351 N.W. 93RD STREET 23. STREETADORESS 8351 N.W. 93RD STREET 23. STREETADORESS 8351 N.W. 93RD STREET 23. STREETADORESS 8351 N.W. 93RD STREET 24. CITY-ST-ZIP Medley, FL 33166 Change Addition ACADITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 AT THE D D DELETE 4. TITLE MD D DELETE 4. TITLE MD D D D DELETE 5. TITLE MD D D DELETE 5. TITLE MD D DELETE 5. TITLE MD D D DELETE 5. TITLE MD D D D D D D D D D D D D D D D D D D	l	·			<u>↓</u>	L	the sub-site this statement for the purp		registered	
### SIGNATURE OFFICERS AND DIRECTORS NOTE	11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florid e of Florida, Such chan	da Statutes, the de was authoriz	abovi ed by	the com	corporation submits this statement for the purp pration's board of directors. I hereby accept the	appointment as re	egistered	
12	agent, La	am familiar with, and accept the oblig	ations of, Section 617.0	503, Florida St	atutes			• •	•	
12	CICALATUDE							_	[
TITLE	SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable.	(NOTE: Registe	ed Ager	t signature	redained triotifications,			
NAME KNOTTS, GREG 12 NAME 13 STREET ADDRESS 23902 Country Hwy. 561, P.O. Box 157	12.	OFFICERS A			3					
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NAME TURNER, WAYNE		+				T-ZIP_	Medies, Fr 22100	□ Change	Addition	
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	CITY-ST-ZIP	and if that the information county -	with thin filing doop ==*				d in Section 119 07(3)(i) Florida Statutes I furt	her 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: