2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#766137

FILED Feb 28, 2007 Secretary of State

Entity Name: PRECAST CONCRETE STRUCTURES ASSOCIATION OF FLORIDA, INC.

| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | | |
|---|---|--------------------------------|---|---|--|--|
| | KLER ROAD | | | | | |
| SUITE 8 FT MYERS | s, FL 33919 | US | | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | |
| | KLER ROAD | | | | | |
| SUITE 8 FT MYERS | s, FL 33919 | US | | | | |
| FEI Number: | 59-2415781 | FEI Number Applied For () | FEI Number Not Appl | icable () Certificate of Status Desired () | | |
| Name and | Address of C | current Registered Agent: | Name and | Address of New Registered Agent: | | |
| SUITE 8 | RED L. (LER ROAD 5, FL 33919 U | IS | | | | |
| The above | | | urpose of changing i | ts registered office or registered agent, or both, | | |
| SIGNATUF | | | | | | |
| | Electron | ic Signature of Registered Age | nt | Date | | |
| OFFICERS AND DIRECTORS: | | | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | VOGELSANG, N P.O. BOX 2360 | | Title: Name: Address: City-St-Zip: | ()Change ()Addition | | |
| Title: Name: Address: City-St-Zip: | STD () KOVACS, GREC P.O. BOX 370 ESTERO, FL 3 | | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | D () TURNER, WAYI P.O. BOX 369 N DELAND, FL 3 | √A | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | MCGEE, FRED | RLOS BLVD, SUITE H | Title: Name: Address: City-St-Zip: | M (X) Change () Addition MCGEE, FRED L 6710 WINKLER ROAD #8 FT MYERS, FL 33919 US | | |
| Title: Name: Address: City-St-Zip: | BARD, WILLIAM 2140 PONDELL | | Title: Name: Address: City-St-Zip: | () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | PD () LISKEY, GREG 23902 COUNTY ASTATULA, FL | ′ HWY. 561 | Title: Name: Address: City-St-Zip: | ()Change()Addition | | |
| | | | | | | |

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRED L. MCGEE M 02/28/2007