

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000456

FILED  
Apr 11, 2008  
Secretary of State

Entity Name: CONSTRUCTION FORMS, INC.

**Current Principal Place of Business:**

777 MARITIME DRIVE  
PORT WASHINGTON, WI 530740308

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 308  
PORT WASHINGTON, WI 530740308

**New Mailing Address:**

FEI Number: 39-1104344      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ADLER, DEAN  
1060 WINDING WATER CIRCLE  
WINTER SPRINGS, FL 32708 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: P ( ) Delete  
Name: KASTELIC, ALAN J  
Address: 777 MARITIME DRIVE  
City-St-Zip: PORT WASHINGTON, WI

Title: CAT ( ) Delete  
Name: FINNERAN, WILLIAM B  
Address: 888 SEVENTH AVENUE, 40TH FLOOR  
City-St-Zip: NEW YORK, NY 10019

Title: D ( ) Delete  
Name: SCOTT, WILLIAM C  
Address: 445 PARK AVENUE SUITE 1905  
City-St-Zip: NEW YORK, NY 10022

Title: CFO ( ) Delete  
Name: SKAAR, GREGORY L  
Address: 777 MARITIME DR  
City-St-Zip: PORT WASHINGTON, WI 53074

**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:

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: GREGORY L SKAAR

CFO

04/11/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date