2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 13, 2005 8:00 am Secretary of State DOCUMENT # F94000002201 1. Entity Name 04-13-2005 90023 045 ***150.00 TINDALL CONCRETE CORPORATION OF SOUTH **CAROLINA** Principal Place of Business Mailing Address P.O. BOX 1778 SPARTANBURG SC 29304 P.O. BOX 1778 SPARTANBURG SC 29304 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 57-0762671 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!!- FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 \$5.00 May Be Election Campaign Financing Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change TITLE ΔS ☐ Delete TITLE Addition Secretaryy LANG, CO NAME NAME Lang, C O STREET ADDRESS 137 WESTMEATH DR STREET ADDRESS 137 Westmeath Dr CITY-ST-ZIP **MOORE SC 29369** CITY-ST-ZIP <u> Moore SC 29369</u> TITLE CTC ☐ Delete TITLE ☐ Change ☐ Addition NAME LOWNDES III, WILLIAM NAME 720 OTIS BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SPARTANBURG SC 29302 CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME FORCE, GREG M NAME STREET ADDRESS STREET ADDRESS BAILEY ROAD CITY-ST-ZIP CITY-ST-7IP FAIRFOREST SC 29336 TITLE ☐ Delete TITLE K Change ☐ Addition Director LOWNDES, HENRIETTA NAME Lowndes Henrietta 720 OTIS BLVD STREET ADDRESS STREET ADDRESS 720 Otis Blvd SPARTANBURG SC 29302 CITY-ST-7IP CITY-ST-7P <u>Spartanburg SC</u> 29302 TITLE ☐ Delete TITLE ☐ Change Addition MAGGIARI, ANNE L NAME NAME 110 MIDDLE ST. STREET ADDRESS STREET ADDRESS MOUNT PLEASANT SC 29464 CITY-ST-ZIP CITY-ST-ZIP ■ Addition TITLE ☐ Delete THILE Change LOWNDES, CAROLINE M NAME NAME 2767 PEACHTREE RD., 34 STREET ADDRESS STREET ADDRESS ATLANTA GA CITY-ST-7IP CITY-ST-ZIP

12. Thereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Cheryl O. Lang 4-7-05
SIGNATURE AND TYPED OR PRINTED KAME OF SIGNING OFFICER OR DIRECTOR Date

FILED