

**2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Apr 06, 2011  
Secretary of State**

DOCUMENT# G95772

Entity Name: DUVAL ASPHALT PRODUCTS, INC.

**Current Principal Place of Business:**

7544 PHILIPS HIGHWAY  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

7544 PHILIPS HIGHWAY  
JACKSONVILLE, FL 32256

**New Mailing Address:**

FEI Number: 59-2397581      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JURGENSEN, PAUL M  
Address: 7544 PHILLIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32256

Title: ST  
Name: CARBONARA, JOSEPH M  
Address: 7544 PHILLIPS HWY  
City-St-Zip: JACKSONVILLE, FL

Title: AS  
Name: MILLER, MARIE E  
Address: 7544 PHILIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32256

Title: AS  
Name: WRIGHT, CHRISTOPHER E  
Address: 7544 PHILLIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32256

Title: AS  
Name: ENGLE, DANNY L  
Address: 7544 PHILIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32256

I hereby 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 all other like empowered.

SIGNATURE: PAUL M. JURGENSEN

P

04/06/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date