


2005 FOR PROFIT CORPORATION ANNUAL REPORT

Due 4/20
FILED

Apr 15, 2005 08:00 AM
Secretary of State

DOCUMENT # L75151
1. Entity Name
JIM'S CONCRETE OF BREVARD, INC.



Principal Place of Business: **6929 PHILLIPS PARKWAY DR,S JACKSONVILLE, FL 32256 US**
Mailing Address: **6929 PHILLIPS PARKWAY DR,S JACKSONVILLE, FL 32256 US**

DO NOT WRITE IN THIS SPACE



03142005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3018005	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**JACOBSEN, JAMES J
6929 PHILLIPS PARKWAY DR S
JACKSONVILLE, FL 32256**

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

1100000308696
04/16/05-80008-006 158.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDST JACOBSEN, JAMES 5115 S R 13 SAINT AUGUSTINE, FL 32092
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JACOBSEN, LISA 5115 S R 13 SAINT AUGUSTINE, FL 32092
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ARRINGTON, DANNY 2735 NOBILITY AVE MELBOURNE, FL 32904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JACOBSEN, HARRY O 1541 SUNSET DRIVE JACKSONVILLE BEACH, FL 32250
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PHELPS, JEFFREY 1249 LAKE PARKE DR JACKSONVILLE, FL 32259
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WASHINGTON, BOBBY RAY 3643 HAVENWOOD DR MIDDLEBURG, FL 32068

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *X* James Jacobson Pres. Date: 4-13-05 Daytime Phone #: 9048864743