2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2007
Secretary of State

DOCUMENT# P00000087176

Entity Name: W & S CONCRETE, INC.

Current Principal Place of Business:

P.O. BOX 182
SORRENTO, FL 32776

New Principal Place of Business:

43914 DOCTORS COVE ROAD
ALTOONA, FL 32702

Current Mailing Address:

P.O. BOX 182
SORRENTO, FL 32776

New Mailing Address:

FEI Number: 59-3673418 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANGSTERY, ROBERT
24700 WALKABOUT RANCH ROAD
SORRENTO, FL 32776 US

Name and Address of New Registered Agent:

SANGSTERY, ROBERT
43914 DOCTORS COVE ROAD
ALTOONA, FL 32702 US

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: _____ 01/09/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: SANGSTER, ROBERT T
Address: P.O. BOX 182
City-St-Zip: SORRENTO, FL 32776

Title: V ( ) Delete
Name: WHITEHILL, FRANK
Address: 26428 CIR. 44-19
City-St-Zip: EUSTIS, FL 32726

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ROBERT SANGSTER DPS 01/09/2007
Electronic Signature of Signing Officer or Director — Date