

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 23, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000114027 1. Entity Name ARNOLD'S CONCRETE, INC.	
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Principal Place of Business 141 SANDY SPRINGS LANE TALLAHASSEE, FL 32312	Mailing Address 141 SANDY SPRINGS LANE TALLAHASSEE, FL 32312
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DO NOT WRITE IN THIS SPACE



08212007 No Chg-P CR2E034 (11/05)

4. FEI Number 86-1083906	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ARNOLD, HOWARD
141 SANDY SPRINGS LANE
TALLAHASSEE, FL 32312

**DO NOT WRITE
IN THIS SPACE**

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
Due by September 14, 2007**

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

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ARNOLD, HOWARD 141 SANDY SPRINGS LANE TALLAHASSEE, FL 32312
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08/23/07-80003-012 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Howard Arnold Howard Arnold 08/21/07 893-1766
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #