

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Jan 20 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # 144218 (5)**  
 1. Corporation Name  
**FLORIDA ROCK INDUSTRIES, INC.**



Principal Place of Business: 155 E. 21 ST. % RUGGLES B. CARLSON JACKSONVILLE FL 32206  
 Mailing Address: C/O DENNIS D FRICK PO BOX 4667 JACKSONVILLE FL 32201-4667 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/13/1945**  
 4. FEI Number: **59-0573002** Applied For:  Not Applicable  
 5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
 6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent  
**FRICK, DENNIS D**  
**155 E 21ST ST**  
**10**  
**JACKSONVILLE FL 32206**

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, State (FL), and Zip Code.

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent Signature of Office is Not Acceptable) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	VPT	<input checked="" type="checkbox"/> DELETE
NAME	CARLSON, RUGGLES B	
STREET ADDRESS	155 E 21 ST	
CITY - ST - ZIP	JACKSONVILLE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	FICHTHORN, LUKE E.	
STREET ADDRESS	518 HOLLOW TREE RIDGE RD	
CITY - ST - ZIP	DARIEN CT	
TITLE	DPCE	<input type="checkbox"/> DELETE
NAME	BAKER, JOHN D III	
STREET ADDRESS	155 E. 21 ST.	
CITY - ST - ZIP	JACKSONVILLE FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	FRICK, DENNIS D	
STREET ADDRESS	155 E. 21ST STREET	
CITY - ST - ZIP	JACKSONVILLE FL	
TITLE	DC	<input type="checkbox"/> DELETE
NAME	BAKER, EDWARD L	
STREET ADDRESS	155 E 21ST ST	
CITY - ST - ZIP	JACKSONVILLE FL	
TITLE	EVP	<input type="checkbox"/> DELETE
NAME	HORNER H B	
STREET ADDRESS	155 E 21ST ST	
CITY - ST - ZIP	JACKSONVILLE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VP, CFO, Treasurer, Asst. Sec.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	James Jeffrey Gilstrap	
1.3 STREET ADDRESS	155 East 21st Street	
1.4 CITY - ST - ZIP	Jacksonville, FL 32206	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I hereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

Dennis D. Frick, Secretary 1-9-98 (904) 355-1781

CR2E034 (10/97)