


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # 173487
 1. Entity Name
CEMENT INDUSTRIES, INC.



Principal Place of Business Mailing Address
2709 JEFFCOTT ST **PO BOX 823**
FT. MYERS, FL 33901 **FORT MYERS, FL 33902**

DO NOT WRITE IN THIS SPACE



03292006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-0697707	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THOMPSON, GAY R
2709 JEFFCOTT ST
FORT MYERS, FL 33901

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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 _____ DATE _____
Signature: typed or printed name of registered agent, and not applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

100000507469
 04/27/06-80067-012 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD THOMPSON, GAY REBEL 11604 TIMBERLINE CIR FT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD THOMPSON, W.BROWN III 30 TIMBERLAND CIRCLE FORT MYERS, FL 33919
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD THOMPSON, SHARON 30 TIMBERLAND CIRCLE FORT MYERS, FL 33919
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD TERRELL, CARIMI 17901 DEVORE LANE FORT MYERS, FL 33913
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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: *Gay Rebel Thompson* **GAY REBEL THOMPSON, PRESIDENT** 4/12/06 (239) 332-1440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #