

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 173487

FILED
Apr 20, 2009
Secretary of State

Entity Name: CEMENT INDUSTRIES, INC.

Current Principal Place of Business:

2709 JEFFCOTT ST
FT. MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

PO BOX 823
FORT MYERS, FL 33902

New Mailing Address:

FEI Number: 59-0697707 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: THOMPSON, GAY REBEL
Address: 11604 TIMBERLINE CIRCLE
City-St-Zip: FORT MYERS, FL 33966

Title: VD () Delete
Name: THOMPSON, W. BROWN III
Address: 30 TIMBERLAND CIRCLE
City-St-Zip: FORT MYERS, FL 33919

Title: TD () Delete
Name: THOMPSON, SHARON
Address: 30 TIMBERLAND CIRCLE
City-St-Zip: FORT MYERS, FL 33919

Title: SD () Delete
Name: TERRELL, CARMIM
Address: 17901 DEVORE LANE
City-St-Zip: FORT MYERS, FL 33913

Title: D () Delete
Name: DRAGICH, VICKIE M
Address: 12800 ALLENDALE CIRCLE
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: THOMPSON, W. BROWN, III
Address: 30 TIMBERLAND CIRCLE SOUTH
City-St-Zip: FORT MYERS, FL 33919

Title: TD (X) Change () Addition
Name: THOMPSON, SHARON M
Address: 30 TIMBERLAND CIRCLE SOUTH
City-St-Zip: FORT MYERS, FL 33919

Title: SD (X) Change () Addition
Name: TERRELL, CARMIM
Address: 17901 DEVORE LANE
City-St-Zip: FORT MYERS, FL 33913

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: GAY REBEL THOMPSON

P

04/20/2009

Electronic Signature of Signing Officer or Director

_____ Date