

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 183403 (5)

1. Corporation Name

SARASOTA PRECAST PRODUCTS, INC.



Principal Place of Business

P O BOX 784
1415 MYRTLE AVE
SARASOTA FL 34234-4723

Mailing Address

P O BOX 784
1415 MYRTLE AVE
SARASOTA FL 34234-4723

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

MCCARTHY, MICHAEL, W
1415 MYRTLE ST
SARASOTA FL 34234

81 Name

82 Street Address P.O. Box Number is Not Acceptable

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1506, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

Signature of the person named as registered agent, with date

Signature of the Secretary of State, with date

Date

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	MCCARTHY, RAYMOND J	
STREET ADDRESS	5326 CALLE FLORIDA	
CITY, ST, ZIP	SARASOTA FL	
TITLE	P	DELETE
NAME	MCCARTHY, MICHAEL W.	
STREET ADDRESS	527 BAYVIEW PARKWAY	
CITY, ST, ZIP	NOKOMIS FL	
TITLE	D	DELETE
NAME	MCCARTHY, WILMA	
STREET ADDRESS	5326 CALLE FLORIDA	
CITY, ST, ZIP	SARASOTA FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	Change	Addition
12 NAME		
13 STREET ADDRESS		
14 CITY, ST, ZIP		
2. TITLE	Change	Addition
22 NAME		
23 STREET ADDRESS		
24 CITY, ST, ZIP		
3. TITLE	Change	Addition
32 NAME		
33 STREET ADDRESS		
34 CITY, ST, ZIP		
4. TITLE	Change	Addition
42 NAME		
43 STREET ADDRESS		
44 CITY, ST, ZIP		
5. TITLE	Change	Addition
52 NAME		
53 STREET ADDRESS		
54 CITY, ST, ZIP		
6. TITLE	Change	Addition
62 NAME		
63 STREET ADDRESS		
64 CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Raymond J. McCarthy
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-11-96

CR2E034 (12/95)