2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2003 8:00 am
Secretary of State
02-25-2003 90140 041 ***150.00

DOCUMENT # 230782

1. Entity Name
SOUTHERN CONCRETE CONSTRUCTION CO INC

Principal Place of Business	Mailing Address
605 E OGLETHORPE BLVD. P.O. BOX 711 ALBANY GA 31702-0711 US	605 E OGLETHORPE BLVD. P.O. BOX 711 ALBANY GA 31702-0711 US

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
733 LIBERTY EXPRESSWAY S.E.	P.O. Box 711
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ALBANY, GA	City & State: ALBANY, GA
Zip: 31705 Country: US	Zip: 31702-0711 Country: US

4. FEI Number 58-0827830 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LAMH, MARION D III 217 PINEWOOD DRIVE TALLAHASSEE FL 32303	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSTD ALDAY, LARRY 605 E OGLETHORPE BLVD ALBANY GA 31705	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WILLIS, BILLY 605 E OGELTHORPE BLVD ALBANY GA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD MADDOX, W L 605 E OGELTHORPE BLVD ALBANY GA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WILLIS, BOBBY R 605 E OGLETHORPE BLVD ALBANY GA 31705	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WILLIS, A D 605 E OGLETHORPE BLVD ALBANY GA 31705	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 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: SIGNATURE REQUIRED LARRY ALDAY 2-21-03 229.435.0786
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/02)