

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

FILED

Mar 26 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 # 231296 (5)  
1. Corporation Name  
ATLANTIC SAND AND STONE, INC.

Principal Place of Business  
2719 OLEANDER AVENUE  
FT. PIERCE FL 34982-5872

Mailing Address  
2719 OLEANDER AVENUE  
FT. PIERCE FL 34982-5872



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/21/1959	
21		26		4. FEI Number 59-0881691	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip	Country	Zip	Country		
24	25	29	30		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
NELSON, CRAIG A. 2719 OLEANDER AVE. FT. PIERCE FL 33482				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 607.0502 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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

*Craig A. Nelson*

3/23/1998

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILD, RAYMOND	1.2 NAME	
STREET ADDRESS	EDWARDS RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT PIERCE, FL 00000	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DALLAND, ERNEST K.	2.2 NAME	
STREET ADDRESS	3200 N A1A HWY	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT PIERCE, FL 00000	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIMMEL, MARGARET	3.2 NAME	LEWIS, Margaret
STREET ADDRESS	EDWARDS RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT PIERCE, FL 00000	3.4 CITY-ST-ZIP	
TITLE	PD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NELSON, CRAIG A	4.2 NAME	
STREET ADDRESS	2719 OLEANDER AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT PIERCE, FL 00000	4.4 CITY-ST-ZIP	
TITLE	SD	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILD, CARL E	5.2 NAME	
STREET ADDRESS	EDWARDS RD	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT PIERCE, FL 00000	5.4 CITY-ST-ZIP	
TITLE	VD	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DALLAND, PHYLLIS R	6.2 NAME	
STREET ADDRESS	3200 N A1A HWY	6.3 STREET ADDRESS	
CITY-ST-ZIP	FT PIERCE, FL 00000	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.

SIGNATURE: *Craig A. Nelson* *Craig A. Nelson* 3/31/1998 561 461-4880

CR2E034 (10/97)