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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 242793 (8)

1. Corporation Name

H. C. BUCHANAN CONCRETE, INC.



Principal Place of Business

Mailing Address

H C BUCHANAN
1410 ATLANTA AVE
ORLANDO FL 32806

H C BUCHANAN
1410 ATLANTA AVE
ORLANDO FL 32806

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BUCHANAN, H. C., JR.
8520 BILLINGSHURST PL
ORLANDO FL 32825

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

H.C. Buchanan Jr. Pres. 1-18-96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
BUCCHANAN, CHARLES P.
STREET ADDRESS
5311 LONE PINE ROAD
CITY-ST-ZIP
ORLANDO FL

TITLE ☐ DELETE

NAME
BUCCHANAN, H. C. JR.
STREET ADDRESS
8520 BILLINGSHURST PL
CITY-ST-ZIP
ORLANDO FL

TITLE ☐ DELETE

NAME
BAKER, GERALD E.
STREET ADDRESS
855 MANN ROAD
CITY-ST-ZIP
BARTOW FL

TITLE ☐ DELETE

NAME
BUCCHANAN, OLLIE H.
STREET ADDRESS
8508 GRINSTEAD CT
CITY-ST-ZIP
ORLANDO FL

TITLE ☐ DELETE

NAME
ROTENBERGER, DAVID M III
STREET ADDRESS
2745 AMSDEN ROAD
CITY-ST-ZIP
WINTER PARK FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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:

H.C. Buchanan Jr. Pres. 1-18-96

Date

Daytime Phone #

(407) 849-6070

CR2E034 (12/95)