## 2003 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT# 279709** 

Entity Name: SCHWAB READY-MIX, INC.

FILED Apr 23, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2110 PONDELLA RD 6700-4 DANIELS PARKWAY

PO BOX 4727 PO BOX 60307

NO FT MYERS, FL 339184727 US FORT MYERS, FL 33912 US

**Current Mailing Address:** 

P O BOX 400

Name: Address:

City-St-Zip:

P O BOX 400

DOVER, OH 44622

DOVER, OH 44622 US

FEI Number: 59-1039196 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

**New Mailing Address:** 

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LANTRIP, DAVID
4181 SILVER SWORD CT.
N. FORT MYERS, FL 33903
LANTRIP, DAVID
4181 SILVER SWORD CT.
N. FORT MYERS, FL 33903
N. FORT MYERS, FL 33903

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: DAVID LANTRIP 04/23/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: CD (X) Change ( ) Addition

Name: SCHWAB, JERRY A., Address: SCHWAB, J A
Address: 2110 PONDELLA RD Address: 6700-4 DANIELS PARKWAY
City-St-Zip: N. FORT MYERS, FL 33912

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 SCHWAB, DAVID A.,
 Name:
 SCHWAB, DAVID A.

 Address:
 2110 PONDELLA RD
 Address:
 6700-4 DANIELS PARKWAY

 City-St-Zip:
 N. FORT MYERS, FL
 City-St-Zip:
 FORT MYERS, FL
 33912

Title: SD ( ) Delete Title: STD (X) Change ( ) Addition

Name: SCHWAB, DONNA, Name: SCHWAB, DONNA L
Address: 2110 PONDELLA RD Address: 6700-4 DANIELS PARKWAY
City-St-Zip: N. FORT MYERS, FL City-St-Zip: FORT MYERS, FL 33912

Title: TD (X) Delete Title: ( ) Change ( ) Addition Name: SCHWAB, MARY LYNN Name:

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: J A SCHWAB CD 04/23/2003