

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # 298162 1. Entity Name LEHIGH ACRES CONCRETE SUPPLY COMPANY, INC.	
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Principal Place of Business 2330 BRUNER LN SE FT. MYERS, FL 33912 US	Mailing Address 2330 BRUNER LN SE FT MYERS, FL 33912 US
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PAGE, P. D
279 DUNCAN LANE
NORTH FT. MYERS, FL 33903

**DO NOT WRITE
IN THIS SPACE**

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 _____

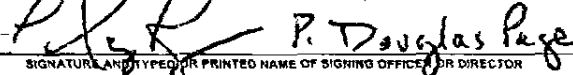
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PAGE, P DOUGLAS 279 DUNCAN LN N FT MYERS, FL 33903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PAGE, PAUL K 11208 OAKMONT CT FT MYERS, FL 33908
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO PAGE, GREGORY 19144 DOGWOOD RD. FT. MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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03/03/06 00047-018 1SD.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  **P. Douglas Page**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **2/24/06 239 482 8370**
Date Daytime Phone #