


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90434 015 ***150.00

DOCUMENT # 412960	
1. Entity Name LOTT'S CONCRETE PRODUCTS, INC.	

Principal Place of Business 429 N HENNIS RD P O BOX 771255 WINTER GARDEN, FL 34787 US	Mailing Address P.O. BOX 771255 P O BOX 771255 WINTER GARDEN, FL 34777-1255 US
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20041812



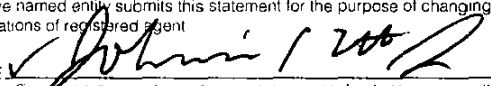
02162006 Chg-P CR2E034 (11/05)

2. Principal Place of Business 429 N. HENNIS RD.	3. Mailing Address P.O. BOX 771255
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State WINTER GARDEN, FL	City & State WINTER GARDEN, FL
Zip 34787	Country
Zip 34777-1255	Country

4. FEI Number 59-1423822	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LOTT, JOHNNIE P 429 N HENNIS RD PO BOX 1255 WINTER GARDEN, FL 32787	7. Name and Address of New Registered Agent Name LOTT, JOHNNIE P., JR. Street Address (P.O. Box Number is Not Acceptable) 1325 KELSO BLVD. City WINDERMERE FL Zip Code 34786
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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.

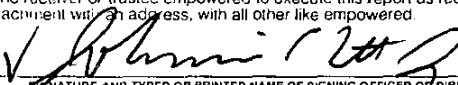
SIGNATURE  DATE **4-26-06**

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LOTT, JOHNNIE P. 175 TEMPLE GROVE DR. WINTER GARDEN, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR/CEO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition LOTT JOHNNIE P., SR. 175 TEMPLE GROVE DR. WINTER GARDEN, FL 34787
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LOTT, WILLER D. 175 TEMPLE GROVE DR. WINTER GARDEN, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FLEMING, BELINDA LOTT 970 E CREST AVE WINTER GARDEN, FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT/TREAS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition LOTT, JOHNNIE P., JR. 1325 KELSO BLVD. WINDERMERE, FL 34786
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  DATE **4-26-06** DAYTIME PHONE **407-656-2112**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR