2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)					FILED
DOCUMENT # 450755				Feb 02, 2004 08:00 AM Secretary of State	
ANDERSON ASPHALT & CONCRETE SERVICES, INC.					
Principal Place of Business		Mailing Address			
1775 MYRTLE ST. SARASOTA FL 34234		1775 MYRTLE ST. SARASOTA FL 34234			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc		Suite, Apt. #, etc.			MOORE CR2E034 (11/03)
City & State		City & State			4. FEI Number 59-1585502 Applied For Not Applicable
Zıp	Country	Zip	Count	try	5. Certificate of Status Desired Fee Required
6. Name and Address of Current Registered Agent				N1+	7. Name and Address of New Registered Agent
ANDERSON, GREGORY D.			ļ	Name	
1775 MYRTLE ST. SARASOTA FL 34234				Street Address (I	(P.O. Box Number is Not Acceptable)
				City	FL Zip Code
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					
Afte	FILE NOW!!! FEE IS \$150.00 er May 1, 2004 Fee will be \$550.00 k Payable to Florida Department c				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.
10.	OFFICERS AND		11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME STREET ADDRESS CITY - ST - ZIP	ANDERSON, GREGORY D.			i	☐ Change ☐ Addition 1100000026457 02/03/04-80008-023 150.00
TITLE NAME	V ANDERSON, JEANINE B	Delete	TITLE NAME		🗌 Change 📃 Addition
STREET ADDRESS CITY - ST - ZIP	1775 MYRTLE ST SARASOTA FL 34234			T ADDRESS ST-ZIP	
TITLE	V STUBBS, RICHARD D	Delete	TITLE NAME	1	Change Addition
STREET ADDRESS	1775 MYRTLE ST SARASOTA FL 34234		STREE	T ADDRESS	
TITLE NAME		Delete	TITLE		Change Addition
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP TITLE		Delete	DITLE	ST-ZIP	Change Addition
NAME STREET ADDRESS CITY-ST-ZIP				T ADDRESS ST-ZIP	
title Name		Delete	Totle Name	1	Change Addition
STREET ADDRESS CITY - ST - ZIP			CITY-	T ADDRESS ST- ZIP	
12. 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. J 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:					