

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 14, 2008 08:00 AM
Secretary of State**

DOCUMENT # 598131

1. Entity Name
HALL & POPE CONCRETE, INC.



Principal Place of Business
**3107 FRITZKE RD.
DOVER, FL 33527**

Mailing Address
**3107 FRITZKE RD.
DOVER, FL 33527**



01302008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1884990

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HALL, BOBBY F
3107 FRITZKE RD.
DOVER, FL 33527**

**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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

U000000852180
04/01/08-80035-006 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DT
POPE, ALBERT L
3113 FRITZKE RD.
DOVER, FL 33527**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
HALL, BOBBY F
3107 FRITZKE RD.
DOVER, FL 33527**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPD
POPE, BRIAN L
3155 FRITZKE RD
DOVER, FL 33527**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPS
POPE, SHEILA
3113 FRITZKE RD
DOVER, FL 33527**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
HALL, ROBIN
3107 FRITZKE RD
DOVER, FL 33527**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

Albert L Pope
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-08 (813) 986-7450

Date

Daytime Phone #