

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 674176 (3)

1. Corporation Name

GATE ASPHALT CO.



Principal Place of Business

9540 SAN JOSE BLVD
JACKSONVILLE FL 32241
US

Mailing Address

PO BOX 23627
JACKSONVILLE FL 32241-3627
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/19/1980

3a. Date of Last Report

03/29/1995

4. FEI Number

59-2005597

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

PEYTON, H.H.
9540 SAN JOSE BLVD
JACKSONVILLE, FL
32217

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of person who signed this statement

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	SMITH, P. JEREMY JR.	
STREET ADDRESS	9540 SAN JOSE BLVD	
CITY- ST- ZIP	JACKSONVILLE, FL 00000	
TITLE	VD	☐ DELETE
NAME	LUEDERS, JACK C. JR.	
STREET ADDRESS	9540 SAN JOSE BLVD	
CITY- ST- ZIP	JACKSONVILLE, FL 00000	
TITLE	DST	☐ DELETE
NAME	ZEMANEK, LOUIS	
STREET ADDRESS	9540 SAN JOSE BLVD	
CITY- ST- ZIP	JACKSONVILLE, FL 00000	
TITLE	D	☐ DELETE
NAME	FOSTER, DAVID M.	
STREET ADDRESS	9540 SAN JOSE BLVD	
CITY- ST- ZIP	JACKSONVILLE FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 Book 12 or Book 13 if changed, or on an attachment with an address.

SIGNATURE *Louis M. Zemanek* LOUIS M. ZEMANEK
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/05/96 (904) 448-2910

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