

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717386

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: FLORIDA PRESTRESSED CONCRETE ASSOCIATION, INC.

## Current Principal Place of Business:

10150 HIGHLAND MANOR DRIVE  
SUITE 200  
TAMPA, FL 33610 US

## New Principal Place of Business:

1971 WEST LUMSDEN ROAD  
SUITE 317  
TAMPA, FL 33511 US

## Current Mailing Address:

10150 HIGHLAND MANOR DRIVE  
SUITE 200  
TAMPA, FL 33610 US

## New Mailing Address:

1971 WEST LUMSDEN ROAD  
SUITE 317  
TAMPA, FL 33511 US

FEI Number: 64-0476534

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LORD, JOSEPH  
10150 HIGHLAND MANOR DRIVE  
SUITE 200  
TAMPA, FL 33610 US

## Name and Address of New Registered Agent:

LORD, JOSEPH  
1711 CHAPEL TREE CIRCLE  
APARTMENT I (EYE)  
TAMPA, FL 33511 US

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.

SIGNATURE:

04/29/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SWITZER, GLEN  
Address: 11325 CR44E  
City-St-Zip: LEESBURG, FL 34788 US

Title: M ( ) Delete  
Name: JOSEPH LORD  
Address: 1711 CHAPEL TREE CIRCLE  
City-St-Zip: BRANDON, FL 33511 US

Title: PD ( ) Delete  
Name: SHIMP, EARL  
Address: 402 HECKSCHER DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226 US

Title: D ( ) Delete  
Name: THOMPSON, GAY  
Address: P.O. BOX 823, 2709 JEFFCOTT ST  
City-St-Zip: FT MYERS, FL 33902 US

Title: D ( ) Delete  
Name: REICH, BRUCE  
Address: 6301 N 56TH STREET  
City-St-Zip: TAMPA, FL 33610 US

Title: VD (X) Delete  
Name: SHANNON, JERRY  
Address: 16200 S. PEBBLE LAND  
City-St-Zip: FORT MYERS, FL 33912 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: ROBERTSON, JOHN  
Address: PO BOX 19449  
City-St-Zip: TAMPA, FL 33686 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DS (X) Change ( ) Addition  
Name: SWITZER, GLEN  
Address: 402 HECKSCHER DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DT (X) Change ( ) Addition  
Name: BROYLES, ROBIN  
Address: PO BOX 9303  
City-St-Zip: FT. MYERS, FL 33902 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH LORD

M

04/29/2009

Electronic Signature of Signing Officer or Director

Date