



FILED
Apr 30, 2008 8:00 am
Secretary of State

UUUUUW -

DOCUMENT # 800692 1. Entity Name LEHIGH CEMENT COMPANY				04-30-2008 90164 017 ***150.00	
Principal Place of Business 7660 IMPERIAL WAY ALLENTOWN, PA 18195 US		Mailing Address ATTN JEFFRY H BROZYNA - SRV/GC/S 7660 IMPERIAL WAY ALLENTOWN, PA 18195 US			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04172008 Chg-P CR2E034 (12/06)	
City & State		City & State		4. FEI Number 23-0797050 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name Street Address (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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD ERHARD, HELMUT S 7660 IMPERIAL WAY ALLENTOWN, PA 18195 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPCEO ERHARD, HELMUT S. 7660 IMPERIAL WAY ALLENTOWN, PA 18195 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVC SCHEIFELE, BERND C/O 7660 IMPERIAL WAY ALLENTOWN, PA 18195 <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	D NAEGER, LORENZ C/O 7660 IMPERIAL WAY ALLENTOWN, PA 18195 <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	V BROZYNA, JEFFRY H 7660 IMPERIAL WAY ALLENTOWN, PA 18195 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP/GC/S BROZYNA, JEFFRY H. 7660 IMPERIAL WAY ALLENTOWN, PA 18195 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO LEWIS, MICHAEL J 7660 IMPERIAL WAY ALLENTOWN, PA 18195 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP/CFO LEWIS, MICHAEL J. 7660 IMPERIAL WAY ALLENTOWN, PA 18195 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T COLE, JOAN B 7660 IMPERIAL WAY ALLENTOWN, PA 18195 <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: <i>Jeffry H. Brozyna</i> (JEFFRY H. BROZYNA, SVP/GC/S)		24 APRIL 2008		610-366-4600	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

RE: LEHIGH CEMENT COMPANY
 FEDERAL IDENTIFICATION #23-0797050
 FLORIDA DOCUMENT #800692
 FILING DUE DATE: 1 JANUARY - 1 MAY 2008

ATTACHMENT

60032460
 # 800692

UNIFORM BUSINESS REPORT (UBR)
 FOR PROFIT CORPORATION
 REPORTING PERIOD 2008

OFFICERS AND DIRECTORS
 RIDER

10 and 11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	CHANGE	ADDITION
1.1	TITLE	EXECVP		X
1.2	NAME	ALBERT SCHEUER		
1.3	STREET ADDRESS	7660 IMPERIAL WAY		
1.4	CITY-STATE-ZIP	ALLENTOWN, PA 18195		
1.1	TITLE	SRVP		X
1.2	NAME	ROBERT BREYER		
1.3	STREET ADDRESS	7660 IMPERIAL WAY		
1.4	CITY-STATE-ZIP	ALLENTOWN, PA 18195		
1.1	TITLE	CNTRLR		X
1.2	NAME	PATRICIA A. STUDENT		
1.3	STREET ADDRESS	7660 IMPERIAL WAY		
1.4	CITY-STATE-ZIP	ALLENTOWN, PA 18195		
1.1	TITLE	ASST S		X
1.2	NAME	PATRICK M. LYDON		
1.3	STREET ADDRESS	7660 IMPERIAL WAY		
1.4	CITY-STATE-ZIP	ALLENTOWN, PA 18195		
1.1	TITLE	ASST CNTRLR		X
1.2	NAME	JOHN M. HUTCHINSON		
1.3	STREET ADDRESS	7660 IMPERIAL WAY		
1.4	CITY-STATE-ZIP	ALLENTOWN, PA 18195		