## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State DOCUMENT #847569** 01-18-2007 90095 044 \*\*\*150.00 1. Entity Name PNEUMATIC CONCRETE CO., INC. Principal Place of Business Mailing Address 60003581 P.O. BOX 36459 1301 FAIRWAY VIEW LN BIRMINGHAM, AL 35244 BIRMINGHAM, AL 35236 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01152007 Chg-P CR2E034 (12/06) Applied For City & State 4. FEI Number City & State 63-0796723 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM. Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code City FL 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. \* 3 SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. SR.V. PRESIDENT VP Change Addition ☐ Delete TITLE TITLE HUMBLE, WILLIAM G HUMBIE, WILLIAM G NAME NAME NON DIRECTOR 1655 COUNTRY CLUB DRIVE STREET ADDRESS STREET ADDRESS SAME CITY-ST-ZIP CITY-ST-ZIP KILLEN, AL 35645 SAME Addition ☐ Delete Change TITLE TITLE NAME LUCKY, JOHN E. NAME STREET ADDRESS 1301 FAIRWAY VIEW LANE STREET ADDRESS BIRMINGHAM, AL 35244 CITY-ST-ZIP CITY-ST-7IP Addition ☐ Delete ☐ Change TITLE TITLE LUCKY, CAROL S. NAME NAME 1301 FAIRWAY VIEW LN. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BIRMINGHAM, AL Addition ☐ Delete Nolluer RONALD E V: PRES Thange TITLE TITLE 605 VANDAKE DR NAME NAME NON DIRECTOR MADISON, TN 37115 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of 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 ampowered.

**FILED** 

Jan 18, 2007 8:00 am