

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katharine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 854227

1. Corporation Name

M & J MATERIALS, INC.

Principal Place of Business

HWY 11 NORTH, TRUSSVILLE, AL  
BOX 428  
TRUSSVILLE AL 35173

Mailing Address

~~HWY 11 NORTH, TRUSSVILLE, AL~~  
BOX 428  
TRUSSVILLE AL 35173

FILED  
Apr 20, 1999 8:00 am  
Secretary of State

04-20-1999 90147 030 \*\*\*158.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/29/1982

4. FEI Number

63-0714398

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 owes the current year Intangible  
Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

21 TRUSSVILLE AL

2a. Mailing Address

26 P.O. Box 428

Suite, Apt. #, etc.

22 7561 GADSDEN HIGHWAY

Suite, Apt. #, etc.

27 TRUSSVILLE AL 35173

City & State

23 TRUSSVILLE AL 35173

City & State

28 TRUSSVILLE AL 35173

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME HOPSON, FRANK, III

STREET ADDRESS HWY. 11 N.

CITY-ST-ZIP TRUSSVILLE AL

TITLE S ☐ DELETE

NAME JOHNSON, RICHARD K

STREET ADDRESS HWY. 11 N.

CITY-ST-ZIP TRUSSVILLE AL

TITLE VD ☐ DELETE

NAME RUSSELL, JOHN W.

STREET ADDRESS HWY. 11 N.

CITY-ST-ZIP TRUSSVILLE AL

TITLE T ☐ DELETE

NAME ALLEN, DEL J

STREET ADDRESS HIGHWAY 11, NORTH

CITY-ST-ZIP TRUSSVILLE AL

TITLE VP & CFO ☐ DELETE

NAME RICHARD L. DESHAZD

STREET ADDRESS 7561 GADSDEN HIGHWAY

CITY-ST-ZIP TRUSSVILLE AL 35173

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 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 Block 12 or Block 13 if I changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard L. Deshazd

4.15.99

205-655-7451

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)