## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # F01000005736

1. Entity Name

CONCRETE SAWING & DRILLING ASSOCATION, INC.



Jan 13, 2005 08:00 AM Secretary of State

**FILED** 

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

11001 DANKA WAY NORTH SUITE 1 ST. PETERSBURG, FL 33716 11001 DANKA WAY NORTH

SUITE 1

ST. PETERSBURG, FL 33716



01042005 No Chg-NP

CR2E037 (10/03)

4. FEI Number 31-1458058 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

O'BRIEN, PATRICK Ä 11001 DANKA WAY NORTH, SUITE 1 ST. PETERSBURG, FL 33716

## DO NOT WRITE IN THIS SPACE

		l		* · · · · · · · · · · · · · · · · · · ·	Company of the Control of the Contro
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 Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remistating)  DATE					
de 2135 1-11-05	Filing Fee is \$61.25 Due by May 1, 2005	Election Campaign Finance     Trust Fund Contribution	cing 🗀	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
THEE NAME STREET ADDRESS CITY-ST-ZIP	P JOHNSON, TED PO BOX 4 GRP 525, RR 5, WINN PE 6 CANADA, 12c 2z2			U00000180276	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JOHNSTON, TED PO BOX 4 GRP 525, RR 5, WINN PE 6 CANADA, r2c 2z2				01/[3/05-80053-008 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HOLLINGSWORTH, SUSAN 9911 FRANHUN RD HOUSTON, TX 77070		<u>.</u>	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SS RUGLIE, JIM 4000 85TH AVE. N MINNEAPOLIS, MN 55443				
TITLE NAME STREET ADDRESS CHY-ST-ZIP	ED O'BRIEN, PATRICK 11001 DANNA WAY NORTH, SUITE 1 SAINT PETERSBURG, FL 33716	·			
THLE NAME STREET ADDRESS GITY-ST-ZIP	P ALLEN, ROGER 14314 HORTON ST. OVERLAND PARK, KS 66223				
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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.					