2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005206

Entity Name: OLDCASTLE CONCRETE DESIGNS, INC.

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
3650 SOUT TUCSON, A	"H BROADMOI AZ 85713	NT				
Current Mailing Address:			New Mailing Address:			
3650 SOUT TUCSON, A	H BROADMOI Z 85713	NT				
FEI Number: 90-0001106 FEI Number Applied For ()		FEI Number Not Appli	cable () Certificate of Status	Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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.						
SIGNATUR	E:					
	Electroni	c Signature of Registered Agent		Date		
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P/D () I WIEST, DEBY F 3650 SOUTH BR TUCSON, AZ 85	COADMONT	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	DIR () I SANDBROOK, W 3650 SOUTH BR TUCSON, AZ 85	OADMONT	Title: Name: Address: City-St-Zip:	DIR (X) Change () Addition HAAS, KEITH A DIR 3650 SOUTH BROADMONT TUCSON, AZ 85713		
Title: Name: Address: City-St-Zip:	CFO () RUMLEY, RUSS 3650 SOUTH BR TUCSON, AZ 85	COADMONT	Title: Name: Address: City-St-Zip:	()Change()Addition		
Title: Name: Address: City-St-Zip:	SEC () I VALENTINE, PAU 3650 SOUTH BR TUCSON, AZ 85	JL R SEC COADMONT	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	AS (X) HICKMAN, GARY 3650 SOUTH BR TUCSON, AZ 85	COADMONT	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	AS (X) O'DRISCOLL, MI 3650 SOUTH BR TUCSON, AZ 85	OADMONT	Title: Name: Address: City-St-Zip:	()Change ()Addition		

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MANDELINE HENDRICKS POA 03/23/2009