2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2012
Secretary of State

DOCUMENT# F10000004146

Entity Name: ERGON ASPHALT & EMULSIONS, INC.

Current Principal Place of Business:

2829 LAKELAND DR.
JACKSON, MS 39232

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 23028
JACKSON, MS 392253028

New Mailing Address:

FEI Number: 64-0666411 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CD
Name: LAMPTON, WILLIAM W
Address: P. O. BOX 23028
City-St-Zip: JACKSON, MS 392253028

Title: PD
Name: BURNS, J. BAXTER II
Address: P. O. BOX 23028
City-St-Zip: JACKSON, MS 392253028

Title: D
Name: LAMPTON, LESLIE B
Address: P. O. BOX 23028
City-St-Zip: JACKSON, MS 392253028

Title: ST
Name: STONE, KATHRYN W
Address: P. O. BOX 23028
City-St-Zip: JACKSON, MS 392253028

Title: CFOD
Name: BUSBY, A. PATRICK
Address: P. O. BOX 23028
City-St-Zip: JACKSON, MS 392253028

Title: VPD
Name: LAMPTON, ROBERT H
Address: P. O. BOX 23028
City-St-Zip: JACKSON, MS 392253028

I hereby 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 all other like empowered.

SIGNATURE: KATHRYN W STONE ST 04/24/2012

Electronic Signature of Signing Officer or Director Date