## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # F14543

1. Entity Name FORT WALTON CONCRETE, INC.



## **FILED** Apr 14, 2003 8:00 am Secretary of State

04-14-2003 90757 032 \*\*\*150.00

,			COO WE				
Principal Plac 930 CAMPBELI CENTURY FL		Mailing Address 930 CAMPBELL ROAD CENTURY FL 32535		A TOURING WHEN HIS HERE BIRKE BIRKE BIRKE AND BIRKE HAVE BIRKE BIRKE BIRKE BIRKE			
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES	CHECK HERE IF MAKING CHANGES		
City & State		City & State		39~2032310	oplied For ot Applicable		
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Add Fee Require	ditional		
	6. Name and Address of Curi	rent Registered Agent	<b>'</b>	7. Name and Address of New Registered Agent			
	· ·	'	Name				
CAMPBELL, JAMES E. 720 CAMPBELL ROAD			Street Ac	Street Address (P.O. Box Number is Not Acceptable)			
CENTURY FL 32535			City	FL Zip Cod	е		
	e named entity submits this stateme tions of registered agent.	nt for the purpose of changing it	s registered office or	egistered agent, or both, in the State of Florida. I am familiar with,	and accept		
SIGNATURE .	Signature, typed or printed name of registered a	agent and title it applicable. (NO	TE: Registered Agent signatur	required when reinstating) OATE	<del></del>		
' After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550 c Payable to Florida Departmer		1		<b>0</b> May Be I to Fees		
10.		AND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	S IN 11		
	IPD	□ Delete		( DAG 870BATI ) TO 675VL	Addition		
NAME	CAMPBELL, JAMES E.	L Doloic	NAME	SAWES & CAMPBELL, 52 730 CAMPBELL FORD	/		
	720 CAMPBELL ROAD		STREET ADDRESS	930 CAMPBELL FORD			
CITY-ST-ZIP	CENTURY FL 32535		CITY-\$T-ZIP	CANTURY PL 32535			
TITLE		☐ Delete	TITLE	Change	☐ Addition		
NAME		Bolloto	NAME	_ ,			
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
TITLE		☐ Delete	TITLE	☐ Change	Addition		
NAME			NAME				
-STREET ADDRESS:	سرئوت ما ما		STREET ADDRESS				
CITY-ST-ZIP		·	CITY-ST-ZIP				
TITLE	·	☐ Delete	TITLE	☐ Change	☐ Addition		
NAME CERCET ADDRESS			NAME STREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	,		STREET ADDRESS CITY-ST-ZIP				
			-	☐ Change	☐ Addition		
TITLE NAME		☐ Delete	TITLE NAME	□ Change			
			STREET ADDRESS				
	1		CITY-ST-ZIP				
STREET ADDRESS		•					
STREET ADDRESS CITY-ST-ZIP				Change	— □ Addition		
STREET ADDRESS CITY-ST-ZIP TITLE		☐ Delete	TITLE	. Change	Addition		
STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ Delete	TITLE NAME	. Change	☐ Addition		
STREET ADDRESS CITY-ST-ZIP TITLE	,	☐ Delete	TITLE	. Change	Addition		

execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or trustee empowered to execute this report changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Daytime Phone #