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Feb 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000005665 (4)

1. Corporation Name

JOHN SEXTON SAND & GRAVEL CORP.



Principal Place of Business

1815 S. WOLF ROAD
HILLSIDE IL 60162-2105

Mailing Address

1815 S. WOLF ROAD
HILLSIDE IL 60162-2100

3. Date Incorporated or Qualified

11/01/1994

3a. Date of Last Report

04/23/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

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30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
C	SEXTON, EILEEN G	47 ROYAL VALE DR.	OAK BROOK IL 60521	<input checked="" type="checkbox"/>
D	DANIELS, ARTHUR A	4018 BORDEAUX DR.	NORTHBROOK IL 60062	<input type="checkbox"/>
D	DANIELS, KATHLEEN S	4018 BORDEAUX DR.	NORTHBROOK IL 60062	<input type="checkbox"/>
P	COHEN, IRA	938 EUCLID	OAK PARK IL 60302	<input checked="" type="checkbox"/>
VT	MALINSKI, CAROL S	8 ARDEN COURT	OAK BROOK IL 60521	<input type="checkbox"/>
S	LUCEY, GERALD P	38 WATERGATE ROAD	SOUTH BARRINGTON IL 60010-9561	<input type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
D	GIPSON, PAUL E.	606 KEYSTONE AVE.	RIVER FOREST, IL 60305	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	TREWHITT, WAYNE D.	8 OAKHILL DR.	WOODSIDE, CA 94062	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	BURKE, ROBERT R.	1623 GLENWOOD	GLENVIEW, IL 60025	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	Change	Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	Change	Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	Change	Addition

14. I do 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 changed, or on an attachment with an address.

SIGNATURE: *Gerald P. Lucey*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-16-97 (708) 236-7105
Date Daytime Phone #

CR2E034 (9/96)