Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90011 043 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # FOCOOOOGOGA

· Corporation	RD CONCRETE PRODUCTS						
Principal Place of Business Mailing Address					I IDDI(BO IND IDIIB OLII OBNI DDIIA PDIN DD	# 	
945 BROADWAY COLUMBUS GA 31901		P.O. BOX 1360 COLUMBUS GA 31902-1360 US		DO NOT WRITE IN THIS SPACE			
					 Date Incorporated or Qualified 12/26/1996 		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Apr	plied For
26					58-2262702	Not	t Applicable
<u> </u>		Suite, Apt. #, etc.	ite, Apt. #, etc.			\$8.75 A	
27		27			5. Certificate of Status Desired	Fee.Re	quired
City & State		City & State			6. Election Campaign Financing	\$5.00	
Zip Country		Zip Country		Trust Fund Contribution This corporation owes the current year	Added to	5 Fees	
24	25 29		30		Personal Property Tax.		
241	9. Name and Address of Curre				10. Name and Address of New Register	ed Agent	
			81	Name			
SZABO, STEPHEN J III 201 N FRANKLIN ST #2100 TAMPA FL 33602			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
			83				
]	, 2 33332						
			84	City	F	EL 85 Zip C	Code
office or r	to the provisions of Sections 607.056 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was aut	thorized by	the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing its pointment as reg	registered gistered
SIGNATURE	Signature, typed or printed name of registered age	ant and title if applicable (NOTF: 6	Registered Age	nt sugnature requir	red when reinstating) DATE	-	
12.	OFFICERS AND DIRECTORS		13.	K ograda i aqui	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	DP DELETE		1.1 TITLE			☐ Change	Addition
NAME	LAMPTON, MASON H		1.2 NAME				
STREET ADDRESS	1		1.3 STREET ADDRESS				
CITY-ST-ZIP	COLUMBUS GA 31901		1.4 CITY-ST-ZIP				
TITLE	EVPD	DELETE	2.1 TITLE			Change	☐ Addition
NAME	DODELIN, FRED J	23					
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP	COLUMBUS GA			ST-ZIP		Change	Addition
TITLE	S	☐ DELETE	3.1 TITLE			Change	
NAME	SLAUGHTER, NEIL E		32 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP TITLE	COLUMBUS GA 31901 EVP	☐ DELETE	3.4. CITY-5 4.1 TITLE	S1-ZIP		☐ Change	Addition
NAME	PAUL, LARRY		4. 2 NAME				
STREET ADDRESS	5801 W COMMERCE ST		4.3 STREET ADDRESS				
CITY-ST-ZIP	TAMPA FL		4.4 CITY- S		•		_
TITLE	VPD	☐ DELETE	5.1 TITLE			☐ Change	Addition Addition
NAME	LINDSEY, BETTY J		5.2 NAME			,	
STREET ADDRESS			5.3 STREE	TADDRESS		•	
CITY-ST-ZIP	COLUMBUS GA		54 CITY-S	T-ZIP			
TITLE	T	DELETE	6.1 TITLE	1		Change	☐ Addition
NAME	RENFROE, RONALD G		6.2 NAME		,		
STREET ADDRESS	OAE RECADIMAY		■ 63 STREE	TADDRESS			

14. I 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 attackment with an address, with all other like empowered.

6.4 CITY+ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS 945 BROADWAY

COLUMBUS GA