

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005525

FILED  
Mar 26, 2012  
Secretary of State

**Entity Name:** JACKSON EXCAVATING & LEASING CO., INC.

**Current Principal Place of Business:**

1059 DEVINEY DRIVE  
RAYMOND, MS 39154

**New Principal Place of Business:**

**Current Mailing Address:**

1059 DEVINEY DRIVE  
RAYMOND, MS 39154

**New Mailing Address:**

FEI Number: 64-0599352

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: D  
Name: DEVINEY, WILLIAM C JR.  
Address: SPRINGRIDGE RD.  
City-St-Zip: JACKSON, MS 39209

Title: PD  
Name: DEVINEY, ROBERT B  
Address: SPRINGRIDGE RD.  
City-St-Zip: JACKSON, MS 39209

Title: SD  
Name: BLACK, RICHARD  
Address: SPRINGRIDGE RD.  
City-St-Zip: JACKSON, MS 39212

Title: T  
Name: LOMAX, DANA D  
Address: SPRING RIDGE RD  
City-St-Zip: JACKSON, MS 39212

Title: V  
Name: CLEGG, BRIAN VP  
Address: SPRINGRIDGE RD  
City-St-Zip: JACKSON, MS 39212

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: DANA D LOMAX

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03/26/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date