## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F98000007110

Entity Name: OLDCASTLE PRECAST, INC.

FILED Apr 20, 2005 Secretary of State

Current Principal Place of Business:			Ī	New Principal Place of Business:		
2140 PONI	DELLA ROAD ORT MYERS, F				par rado de Dadineso.	
Current Mailing Address:			I	New Mailing Address:		
SUITE 350	HRIDGE ROAI GA 30350	)				
FEI Number:	91-0782138	FEI Number Applied For ( )	FEI Numi	ber Not Appli	cable ( ) Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	ı	Name and	Address of New Registered Agent:	
1200 SOU	ORATION SYS TH PINE ISLAN ON, FL 33324					
	named entity s of Florida.	ubmits this statement for the	purpose of	changing it	s registered office or registered agent, or both,	
SIGNATUR	RE:					
	Electroni	ic Signature of Registered Ag	ent		Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () SCHACK, JAME 24415 142ND A' KENT, WA 980-	VE SE	1	Title: Name: Address: City-St-Zip:	P/D (X) Change ( ) Addition SCHACK, JAMES B 2820 A STREET AUBURN, WA 98002	
Title: Name: Address: City-St-Zip:	VST () QUINN, ROBER 2820 A STREET AUBURN, WA 9	-	1	Title: Name: Address: City-St-Zip:	S/T (X) Change ( ) Addition QUINN, ROBERT D 2820 A STREET AUBURN, WA 98002	
Title: Name: Address: City-St-Zip:	FARINHA, ERIĆ	Delete DYAL ATLANTA DRIVE, SUITE A 0084	1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KELLY, PETE	Delete ATLANTA DRIVE SUITE A 0084	1	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition MCCULLOUGH, JOSEPH 375 NORTHRIDGE ROAD, SUITE 350 ATLANTA, GA 30350	
Title: Name: Address: City-St-Zip:	HICKMAN, GÀŔ	GE ROAD, SUITE 350	1	Title: Name: Address: City-St-Zip:	AS (X) Change ( ) Addition HICKMAN, GARY P 375 NORTHRIDGE ROAD, SUITE 350 ATLANTA, GA 30350 US	
Title: Name: Address: City-St-Zip:	O'DRISCOLL, M	Delete IICHAEL G AST SEC GE ROAD, SUITE 350 10350 US	1	Title: Name: Address: City-St-Zip:	AS/D (X) Change ( ) Addition O'DRISCOLL, MICHAEL G 375 NORTHRIDGE ROAD, SUITE 350 ATI ANTA GA 30350 US	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GARY P. HICKMAN AS 04/20/2005