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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

J14642

(9)

GULF COAST CONCRETE OF HERNANDO, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

% C. Wayne Speakman 3410 Shoal line Boulevard Spring Hill Fl 34807

2. Principal Place of Business

21

% C. Wayne Speakman 3410 Shoal Line Boulevard Spring Hill Fl 34607

FILED Apr 27 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

Not Applicable

 Date Incorporated or Qualified 05/19/1986

59-2760689

4. FEI Number

Suite, Apt.	#, etc.	Suite, A	Suite, Apt. #, etc.				Certificate of Status Desired Section Section				
City & Stat	City & State City						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 24	26 29 30				Country		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.				
	9, Name and Address of Current	Registered Ag	jent				10. Name and Address of New	Registere	d Agent		
SP	EAKMAN, C. WAYNE			ין [61) 1	Name				Ĩ	
3410 SHOAL LINE BOULEVARD						82 Street Address (P.O. Box Number is Not Acceptable)					
SPRING HILL FL 33526					83						
						Oity		F			
office or i	to the provisions of Sections 607.0502 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such	change was a	uthorized	by th						
SIGNATURE	Signature, typed or printed name of registrired agen	t and tille if applicable	NOTE	· Registered	Agent 8	Bionalura regulted	d when reinstating)	DATE]	
12.	OFFICERS AND DIRECTORS			13.		- Bratana toda	ADDITIONS/CHANGES TO O		D DIRECTOR	S IN 12	
TITLE	D		DELETE	1.1 7171	1.1 TITLE				☐ Change	Addition	
NAME	SPEAKMAN, C. WAYNE			1.2 NAM	ME	Ì				ì	
STREET ADDRESS	3280 INDIAN GULF LANE			1.3 STR	EET AD	DRESS				i	
CITY-ST-ZIP	SPRING HILL FL			1.4 CIT	Y-ST-2	MP				ł	
TITLE		7-1:	DELETE	2.1 TITL					Change	Addition	
NAME				2.2 NAN	ME						
STREET ADDRESS				23 STR	EET AD	ORESS					
CITY-ST-ZIP				2. 4 CIT	Y-ST-	ZIP				i	
TITLE			DELETE	3 1 TITL					Change	■ Addition	
NAME				3.2 NAN	J E					}	
STREET ADDRESS				3.3 STR	EET ADI	DRESS					
CITY-ST-ZIP				3.4. CIT	Y-ST-Z	ZIP				ŀ	
TITLE			DELETE	4.1 TITL					Change	Addition	
NAME				4. 2 NA	ME					İ	
STREET ADDRESS				4.3 STA	eet adi	DRESS				}	
CITY-ST-ZIP				4.4 CITS	Y-51-Z	ne l					
TITLE			DELETE	5.1 TITL					Change	☐ Addition	
NAME				5.2 NAN	JE					ŀ	
STREET ADDRESS				5.3 STR	EET ADO	DRESS					
CITY-ST-ZIP	İ			5.4 C/m	Y-\$T-Z	MP				ľ	
TITLE		I	DELETE	6.1 TITL					Change	Addition	
NAME				6.2 NAA	AE.	-				ĺ	
STREET ADDRESS				6.3 STR	EET ADO	DRESS					
CITY-ST-ZIP				6.4 CIT	Y-ST-Z	ile					
14. I hereby of indicated	certify that the information supplied will on this annual report or supplemental	annual report is	true and accu	rate and	that r	my signature	shall have the same legal effect :	as if made u	inder oath; tha	tlam an	
officer or	director of the corporation or the recei	ver or trustee er	npowered to e	xecute th	is rep	port as requir	red by Chapter 607, Florida Statut	es; and that	my name app	ears in	