

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 02, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # J16782**

**1. Entity Name**  
**SOUTHERN PRE-CAST, INC.**



**Principal Place of Business**  
**13365 SOUTHERN PRECAST DRIVE**  
**ALACHUA, FL 32615 US**

**Mailing Address**  
**13365 SOUTHERN PRECAST DRIVE**  
**ALACHUA, FL 32615 US**



01292004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

**4. FEI Number**  
**34-1528922**

**Applied For**  
**Not Applicable**

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**LINDSAY, ROLAND C JR.**  
**1922 NW 133RD TERR.**  
**GAINESVILLE, FL 32606**

**DO NOT WRITE  
IN THIS SPACE**

**8. 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. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

**DATE**

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

**9. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**  
**VD**  
**LINDSAY, ROLAND C.**  
**6090 AKRON AVE.**  
**CANAL FULTON, OH**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**  
**VAS**  
**GESAMAN, TIMOTHY R.**  
**4944 RONDALE CIR NW**  
**MASSILLON, OH**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**  
**TD**  
**LINDSAY, LINDA L.**  
**6090 AKRON AVE.**  
**CANAL FULTON, OH**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**  
**PD**  
**LINDSAY, ROLAND C. JR.**  
**1922 NW 133RD TERR**  
**GAINESVILLE, FL**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

U000000024543  
02/02/04-80072-001 150.00

**DO NOT WRITE  
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**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 or powers or executor or administrator or assignee of the corporation, with full authority to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment to this report.**

**SIGNATURE:** Roland C. Lindsay, Jr.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/04  
Date

386-462-2015  
Daytime Phone #