J 16782

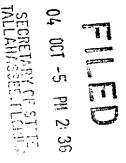
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SOUTHERN PRE-CAST, INC. (Name of corporation)
DOCUMENT NUMBER: J16782
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ROLAND C. LINDSAY, JR. (Name of contact person)
SOUTHERN PRE-CAST, INC. (Firm/Company)
13365 SOUTHERN PRECAST DRIVE
(Address)
ALACHUA, FL 32615
(City/state and zip code)
For further information concerning this matter, please call:
ROLAND C LINDSAY, JR at (386) 462-2015 (Name of contact person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporation orga	onized under the laws of the State of FLORIDA stered agent, or both, in the State of Florida.
I. The name of	the corporation: SOUTHERN PRE-CAS	DECACT DENT. ALACHHIA EL 20045
2. The principal	l office address: 13365 SOUTHERN PF	RECAST DRIVE, ALACHUA, FL. 32615
3. The mailing	address (if different):	
4. Date of incor	rporation/qualification: MAY 29, 1986	Document number: J16782
	nd street address of the current registered artment of State:	agent and registered office on file with the
	ROLAND C. LINDSAY, JR.	
	1922 NW 133RD TERRACE	
	GAINESVILLE, FL 32606	TAL SE
6. The name an (if changed):		cent (if changed) and /or registered office ARE ASSET
	13365 SOUTHERN PRECAST DRIV	E FLORE
	(P.O. Box NOT acceptab	ole) S
	ALACHUA, FL. 32615	
The street addr as changed wil	ress of its registered office and the stree Il be identical.	et address of the business office of its registered agent,
Such change wanthorized by t	as authorized by resolution duly adopt the board, or the corporation has been i	ted by its board of directors or by an officer so notified in writing of the change.
Lapra	tures an officerior director)	ROLAND C. LINDSAY, JR., PRESIDENT (Printed or typed name and title)
I hereby accept I further agree of my duties, a document is be		and agree to act in this capacity. atutes relative to the proper and complete performance bligation of my position as registered agent. Or, if this the registered office address. I hereby confirm that the
LOCALA	CKMAN	SEPTEMBER, 28, 2004
	ignature of Registered Agent)	(Date)
If signing on b	chalf of an entity.	
((Typed or Printed Name)	

* * * FILING FEE: \$35.00 * * *