2007 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # J16782 1. Entity Name SOUTHERN PRE-CAST, INC. Principal Place of Business 13365 SOUTHERN PREAST DRIVE ALACHUA, FL 32615 US ALACHUA, FL 32615 US ALACHUA, FL 32615 US

FILED
Mar 22, 2007 08:00 A
Secretary of State



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No Chg-P

CR2E034 (11/05)

4.	FEI Number
	34-1528922

Applied For Not Applicable

6. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name and Address	of	Current	R	egi	store	ød	Ag	eni	Ł

LINDSAY, ROLAND C JR. 13365 SOUTHERN PRECAST DRIVE ALACHUA, FL 32615

the obligations of registered agent

changed, or on an attachment

DO NOT WRITE IN THIS SPACE

SIGNATURE.	Signature, typed or printed name of registered agent and title	d anniversal (ANTE: Des		required when reinstating)	DATE	 :
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign F Trust Fund Contribut	inancing	\$5.00 May Be Added to Fees	DATE	
10,	OFFICERS AND DIREC	TORS		Ð.,		. "
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				000000676082 03/30/07-80044-01	0 150.0
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LINDSAY, LINDA L. 6090 AKRON AVE. CANAL FULTON, OH			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LINDSAY, ROLAND C.,JR. 1922 NW 133RD TERR GAINESVILLE, FL			ĮN -	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						- - - - - - - - - - - - - - - - - - -
TITLE NAME STREET ADDRESS CITY-ST-ZIP				, 1		
12. I hereby of indicated of the cor	certify that the information supplied with this fi on this report or supplemental report is type a poration or the receiver of rustee empowers	ling does not plalify for the no accurate and that my si to execute misseport as r	ex Imptions cor pnature shall have prired by Chapt	ntained in Chapter 119 re the same legal effecter 607, Florida Statute), Florida Statutes. I further certify that the ct as if made under oath; that I am an office is; and that my name appears in Block 10 o	information er or director or Block 11 if

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