



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2008 08:00 AM
Secretary of State

DOCUMENT # J71325 1. Entity Name KING'S CONCRETE, INC.			
Principal Place of Business % CARROLL K. KING 7232 E. TURNER CAMP RD. INVERNESS, FL 34453 US		Mailing Address % CARROLL K. KING 7232 E. TURNER CAMP RD. INVERNESS, FL 34453 US	
DO NOT WRITE IN THIS SPACE			
		01042008 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-2811134	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent KING, CARROLL K. 7232 E. TURNER CAMP RD. INVERNESS, FL 34453		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE U00000775668 01/08/08-80038-021 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KING, CARROLL K. 7232 E. TURNER CAMP RD. INVERNESS, FL		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KING, CHERYL 7232 E. TURNER CAMP RD. INVERNESS, FL		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 empowered 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 with an address, with all other like empowered.			
SIGNATURE: <i>Carroll K. King</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		1-6-08 352-726-2196 Date Daytime Phone #	