

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # J76882

1. Entity Name
PAVEMENT MAINTENANCE PRODUCTS, INC.



Principal Place of Business
**6320 DANNER DRIVE
SARASOTA, FL 34240**

Mailing Address
**6320 DANNER DRIVE
SARASOTA, FL 34240**

DO NOT WRITE IN THIS SPACE

8 @ 3 2 4 4 . 6 6 6 6 6 6 F &

01062004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2829270

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**WEBB, CHARLES W.
2172 HILLVIEW ST
SARASOTA, FL 33579**

**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
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**000000151131
05/04/04-80034-012 150.00**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WILKES, FREDERICK R.
4724 GREENCROFT ROAD
SARASOTA, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WILKES, CLARA L.
4724 GREENCROFT ROAD
SARASOTA, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WILKES, JEFFREY R.
10412 OAKRUN DRIVE
BRADENTON, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27 941 377-0020