## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 19, 2008 8:00 am Secretary of State

						1. Secretary of State				
DOCUMENT # K56914  1. Entity Name JERRY'S CONCRETE SAWING, INCORPORATED						Secretary of State 05-19-2008 90032 019 ***150.00				
Principal Place of Business Mailing Address						1				
224 CHERRYWOOD DR 224 CHERRYWOOD DR										
MAITLAND, FL 32751 MAITLAND, FL 32751						<b>.</b>				
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Principal Place of Business - No P.O. Box # 3. Mailing Address										
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Suite, Apt.	# etc	Suite, Apt. #, etc.					O1 D	0000004 (40100)		
Salto, Fat.	,, 515.	Solid, 1 pt. ii, s.s.				04282008	Chg-P	CR2E034 (12/06)		
City & Stat	е	City & State	City & State			4. FEI Numb	er	[ A	pplied For	
ony a bian								ot Applicable		
Zip	Country	Zip	try				□ \$8.75 Ad	ditional		
	Joseph	P				5. Certificate	of Status Desired	Fee Require		
<del></del>	6. Name and Address of Current	t Registered Agent	L	T		7. Name and	Address of New R	egistered Agent		
at training area area are agricultural reflection and the second area area.				Name						
BRYSON, SHARON										
224 CHER		Street Address			P.O. Box Numb	er is Not Acceptable	<del>)</del> )			
MAITLANI						<del></del>		····		
and the second s										
				City				FL Zip Cox	de	
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8. The above name spirity 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										
SIGILATORIE.	Signature, typed or printed name of registered agen	t and title if applicable. (NOT	E: Registere	id Agent signat	rue Ledniseo	d when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Finance						.00 May Be				
After M	ay 1, 2008 Fee will be \$550	.00 Trust Fund Con	tribution.	L	Add	led to Fees				
10.	OFFICERS AND	DIRECTORS	11.			ADDITIONS	L CHANGES TO OFF	ICERS AND DIRECTOR	RS IN 11	
TITLE	PD	☐ Delete	TITL		PD				Addition	
NAME	BRYSON, SHARON	□ Dexie	NAM		Con	ald Bry	son wood Pr	23 Onlings		
STREET ADDRESS	224 CHERRYWOOD DRIVE			eet address	000	Chemy	nood Du			
CTTY-ST-ZIP	· ·			-ST-ZIP	Ma	itland!	F1.32751			
	MAITLAND, FL				1,4 100	7,4,4,4,4,7	,	☐ Change	☐ Addition	
TITLE			TITL					☐ change		
NAME	BRYSON, THOMAS L.		NAA	re Eet address						
STREET ADDRESS	224 CHERRYWOOD DR			eet audhess (-st-zip						
CITY-ST-ZIP	MAITLAND, FL	<u> </u>			, Z.				Nat caree	
TITLE	1	☐ Delete	311.1		5/4	AAN BE	n (0h	☐ Change	(X) Addition	
NAME			NAM		an c	Grannin	y son 3002 Dr. Fl. 32457			
STREET ADDRESS	İ			EET ADDRESS	SOA	Chemyo	D1 3 JMY-1			
CITY-ST-ZIP			CIT	/-ST-ZIP	Ma	rrancy	F1. 32731			
TITLE	1	☐ Delete	TITE					☐ Change	Addition	
NAME	1		NAN							
STREET ADDRESS	1			EET ADDRESS						
CITY-ST-ZIP			CIT	Y-ST-ZIP	1					
TITLE		☐ Delete	THI	.E				Change	Addition	
NAME			NAM	AE.						
STREET ADDRESS				EET ADDRESS						
CITY-ST-ZIP			cm	Y-ST-ZIP	<u> </u>					
TITLE		☐ Delete	TITI	E				Change	☐ Addition	
NAME			NA)	<b>AE</b>						
STREET ADDRESS			STF	EET ADDRESS						
	1		000	V CT 710	1					

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: Sharen Bryson Shore Bryson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR OFF

4-25-08 407-834-1255-

Daytime