FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT 1997			Secretary of State DIVISION OF CORPORATIONS				Secretary of State					
	MENT # K5	7503	(0)									
R&SC	ONCRETE SERVIC	E, INC.					1					
Principal Place of Business Malling Address							7					
C/O GEORGE 1 200 N.W. 61ST OCALA FL 326	STREET	200 1	C/O GEORGE W. SLEETH 200 N.W. 61ST STREET OCALA FL 34475-8729									
							3.	Date Incorporated or Qua 12/29/1988	lified		le of Last Re 11/1996	eport [
2. Principal Pl	ace of Business	2s. N	2a. Mailing Address				4.	FEI Number		0010		plied For
21		26						NOT APPLICABLE				t Applicable
Soile, Apt.	#, etc.		uite. Apt. #, etc.				5.	Certificate of Status Desire	ed		\$8.75 A	
City & State)	<u> 27 </u>	ity & State				+	Election Campaign Finance	inn		\$5.00	·
23	•	28	.,				0.	Trust Fund Contribution	ang		Added t	
Zιρ	Country Zip				Country			This corporation has liabil			tax under s.	199.032,
24	25	29		30	,		1_	Florida Statutes] No	
CI E	g. Name and Address	s of Current Register	ed Agent		B1	Name	10.	Name and Address of N	ви нед	ISTOREG A	'deur	
SLEETH, GEORGE W. 200 N.W. 61ST STREET									· · · · · ·		 .	
OCALA FL 32870					82	Street Addre	ess (F	O. Box Number is Not Acc	ceptable	B)		
, J.	D11 C 02010				83			······································		·		
					84	City					85 Zip (Code
						-				FL		
office or ri	egistered agent, or both,	in the State of Florida	Such change was	authorize	d by	the corporati	oratio ion's k	n submits this statement for poard of directors, I hereby	r the pu accept	rpose of the appo	changing its sintment as	s registered registered
agent La	m familiar with, and accep	pt the obligations of, S	Section 607.0505, F	lorida Sta	tutes.							
SIGNATURE	Sign due: syprance printed name o	r registered agent and title if a	opticable. (NO	ITE: Flogistere	d Ager	nt signature require	ed when	reinstating)		DATE		
12.		FICERS AND DIRECT		13.			/	ADDITIONS/CHANGES TO	OFFICE			****
TIHE	P	u	☐ DELETE	1.1 T							L. Change	Addition]
NAME	SLEETH, GEORGE V 200 NW 61ST ST.	γ.		1.2 N								
STREET ADDRESS	OCALA FL			4		ADDRESS						[1
CHY-ST-ZP TITLE	ST		DELETE	1.4 C 2.1 T	ITY-ST	- ZIP					Change	Addition
NAME	SLEETH, JOAN C.		Land 10.174.1	2.2 N		Í						
STREET ADDRESS	200 NW 61ST ST.					ADDRESS						.]
CHY-S1-ZIP	OCALA FL			2.40	ITY-\$	T - ZIP						
TITLE	V		DELETE	3.1 T							Change	Addition
NAME	DUYRAL, REYNOLDS	•		3.2 N								
STREET ADDRESS	RT 1 BOX 576-2 Ocala FL			1		ADDRESS						Ì
CFY-ST-ZP TUME	VVND11L		DELETE	3.4. (41 T	HTY - SI	1-217	·				Change	Addition
NAME				4.21						'		
STREET ADDRESS						ADDRESS						
City - St - ZiP		,,,		4.4 C	ITY-ST	- ZIP						
THILE			DELETE	5.1 TI							Change	Addition
NAME				5.2 N		1						
STREET ADDRESS						ADDRESS						İ
DAY-ST 7#			DELETE	54 C 6.1 Ti	MY-SI	-ZIP					Change	Addition
NAME			wellet	6.2 N							Draings	Sand Cappelloid
STREET ADDRESS						ADDRESS						

6.4 CITY - \$1 - ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

C-TY - \$1 - 24P

TURE AND TYPED OR PRINTER NAME OF SIGNING OFFICER OR DIRECTOR

352 622-1217

FILED

Apr 15 1997 8:00am

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