

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K90267 (1)
1. Corporation Name
SOUTHERN CONCRETE PAVERS, INC.

Principal Place of Business
1581 W. GULF TO LAKE HIGHWAY
LECANTO FL 34461

Mailing Address
1581 W. GULF TO LAKE HIGHWAY
LECANTO FL 34461

APPROVED
AND
FILED
95 APR 24 AM 8:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 05/23/1989	3a. Date of Last Report 05/01/1994
4. FEI Number 59-2954016	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
---	--

9. Name and Address of Current Registered Agent

BRESNAHAN, LORENA
1581 W. GULF TO LAKE HWY.
LECANTO FL 34461

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Lorena Bresnahan
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

4-19-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	1.1 TITLE	☐ Change ☐ Addition
NAME	BRESNAHAN, LORENA	1.2 NAME	
STREET ADDRESS	5701 S. PINE TREE PT.	1.3 STREET ADDRESS	
CITY - ST - ZIP	LECANTO FL	1.4 CITY - ST - ZIP	
TITLE	VP	2.1 TITLE	☐ Change ☐ Addition
NAME	BRESNAHAN, MIKE	2.2 NAME	
STREET ADDRESS	5701 S. PINETREE PT.	2.3 STREET ADDRESS	
CITY - ST - ZIP	LECANTO FL	2.4 CITY - ST - ZIP	
TITLE	VP	3.1 TITLE	☐ Change ☐ Addition
NAME	SIVA, GLENN J	3.2 NAME	
STREET ADDRESS	3028 W. WOODTHRUSH ST.	3.3 STREET ADDRESS	
CITY - ST - ZIP	LECANTO FL	3.4 CITY - ST - ZIP	
TITLE	S	4.1 TITLE	☐ Change ☐ Addition
NAME	SIVA, DEENA	4.2 NAME	
STREET ADDRESS	3028 W. WOODTHRUSH ST.	4.3 STREET ADDRESS	
CITY - ST - ZIP	LECANTO FL	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lorena Bresnahan BRESNAHAN 4-19-95 904-716-3130
Signature and typed or printed name of signing officer or director Date Daytime Phone #