2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020619

Entity Name: CENTURY PRECAST PRODUCTS, LLC

FILED Mar 29, 2004 Secretary of State

Current Dringing Place of Business.	New Dringing Diago of Duginger
Current Principal Place of Business:	New Principal Place of Business:

1950 N.E. 27TH AVENUE GAINESVILLE, FL 32609 US

Current Mailing Address: New Mailing Address:

1950 N.E. 27TH AVENUE GAINESVILLE, FL 32609 US

FEI Number: 59-3759353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROHS, THOMAS J 1950 N.E. 27TH AVENUE GAINESVILLE, FL 32609 US

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

Title:CEOC () DeleteTitle:MGRM (X) Change () AdditionName:ROHS, THOMAS JName:ROHS, THOMAS JAddress:1950 N.E. 27TH AVENUEAddress:1950 N.E. 27TH AVENUE

City-St-Zip: GAINESVILLE, FL 32609 US City-St-Zip: GAINESVILLE, FL 32609 US

Title: VC () Delete Title: MGRM (X) Change () Addition Name: COX, JOHN D Name: COX, JOHN D

Address: 1950 N.E. 27TH AVENUE
City-St-Zip: GAINESVILLE, FL 32609 US
Address: 1950 N.E. 27TH AVENUE
City-St-Zip: GAINESVILLE, FL 32609 US
City-St-Zip: GAINESVILLE, FL 32609 US

Title: P (X) Delete Title: () Change () Addition

 Name:
 STAAB, RON
 Name:

 Address:
 1950 N.E. 27TH AVENUE
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32609 US
 City-St-Zip:

Title: VCFO (X) Delete Title: () Change () Addition

 Name:
 LEFKO, KENNETH F
 Name:

 Address:
 1950 N.E. 27TH AVENUE
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32609 US
 City-St-Zip:

Title: V (X) Delete Title: () Change () Addition

 Name:
 BACOM, JAMES
 Name:

 Address:
 1950 N.E. 27TH AVENUE
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32609 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: THOMAS J ROHS MGRM 03/29/2004