*Amended*

# LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

09-22-2002 90067 028 ****50.00
FILED 201000020619

02 DEC 26 AM 10:02
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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DOCUMENT # L01000020619

1. Entity Name
CENTURY PRECAST PRODUCTS, LLC.

**DO NOT WRITE IN THIS SPACE**

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 1950 NE 27th AVE | 1950 NE 27th AVE |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State: GAINESVILLE FL | City & State: GAINESVILLE FL |
| Zip: 32609 Country: USA | Zip: 32609 Country: USA |

12/26 DO NOT WRITE IN THIS SPACE MJM

4. FEI Number: 59-3759353 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name: ROHS, THOMAS J.
Street Address (P.O. Box Number is Not Acceptable): 1950 NE 27th AVE.
City: GAINESVILLE FL Zip Code: 32609

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.

SIGNATURE: Thomas J. Rohs THOMAS J. ROHS CHAIRMAN + MANAGING PARTNER 9/18/02
Signature, typed or printed name of registered agent and title if applicable. DATE

**FEE IS $50.00**
**Make Check Payable to Department of State**
**DUE BY MAY 1**

9. MANAGING MEMBERS / MANAGERS

| | |
|---|---|
| TITLE: CHAIRMAN OF THE BOARD & CEO<br>NAME: ROHS, THOMAS J.<br>STREET ADDRESS: 1950 NE 27th AVE.<br>CITY-ST-ZIP: GAINESVILLE FL 32609 | TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY-ST-ZIP: |
| TITLE: VICE-CHAIRMAN<br>NAME: COX, JOHN D., PhD<br>STREET ADDRESS: 1950 NE 27th AVE.<br>CITY-ST-ZIP: GAINESVILLE FL 32609 | TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY-ST-ZIP: |
| TITLE: PRESIDENT<br>NAME: STAAB, RONALD<br>STREET ADDRESS: 1950 NE 27th AVE.<br>CITY-ST-ZIP: GAINESVILLE FL 32609 | TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY-ST-ZIP: **DO NOT WRITE** |
| TITLE: VICE PRESIDENT - C.F.O.<br>NAME: LEFKO, KENNETH F.<br>STREET ADDRESS: 1950 NE 27th AVE.<br>CITY-ST-ZIP: GAINESVILLE FL 32609 | TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY-ST-ZIP: **IN THIS SPACE** |
| TITLE: VICE PRESIDENT - MANUFACTURING<br>NAME: BACOM, JAMES<br>STREET ADDRESS: 1950 NE 27th AVE.<br>CITY-ST-ZIP: GAINESVILLE FL 32609 | TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY-ST-ZIP: |
| TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY-ST-ZIP: | TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY-ST-ZIP: |

CR2E083B (12/01)

11. I 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 report is true and accurate and that my 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 THOMAS J. ROHS CHAIRMAN/MANAGING MEMBER 9/16/02 352-335-0033 X 103
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #