

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018489

Entity Name: CENTURY PRECAST, LLC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

7755 PRESERVE LANE, SUITE 3270
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 110281
NAPLES, FL 34108 US

New Mailing Address:

FEI Number: 57-1160597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LESTER, DON E
7755 PRESERVE LANE, SUITE 3270
NAPLES, FL 34119 US

Name and Address of New Registered Agent:

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/MANAGERS:

Title: ED () Delete
Name: LESTER, DON E
Address: 11679 LONGSHORE WAY EAST
City-St-Zip: NAPLES, FL 34119

Title: DP () Delete
Name: ALVIN, ERICSON C
Address: 24770 LYONIA LANE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: S (X) Delete
Name: WALKER, JEFFREY M
Address: 3331 WAVERLY DOCK ROAD
City-St-Zip: JACKSONVILLE, FL 32223

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DON E. LESTER

ED

04/30/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date