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Feb 12 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # **L20613**

(0)

1. Corporation Name

**DAYTONA SAND AND GRAVEL, INC.**

Principal Place of Business

**1698 NORTH NOVA ROAD  
HOLLY HILL FL 32117**

Mailing Address

**1698 NORTH NOVA ROAD  
HOLLY HILL FL 32117-2405**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

**HEEBNER, PETER B., ESQ.  
523 NORTH HALIFAX AVE.  
DAYTONA BEACH FL 32118**

3. Date Incorporated or Qualified

**10/05/1989**

3a. Date of Last Report

**04/24/1996**

4. FEI Number

**59-2986515**

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

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

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **D KUREK, CHESTER T.**  
STREET ADDRESS **1295 MISTLETOE DR**  
CITY- ST- ZIP **HOLLY HILL FL**

TITLE ☐ DELETE

NAME **D KUREK, RUBY V.**  
STREET ADDRESS **1295 MISTLETOE DR**  
CITY- ST- ZIP **HOLLY HILL FL**

TITLE ☐ DELETE

NAME **D KUREK, DAVID M.**  
STREET ADDRESS **1129 WOODSIDE DR**  
CITY- ST- ZIP **HOLLY HILL FL**

TITLE ☐ DELETE

NAME  
STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS

CITY- ST- ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- 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 empowered 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:

*Chester Kurek* (Chester Kurek)

2/7/97

904 255 6310

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)