

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 18, 2005 08:00 AM
Secretary of State

DOCUMENT # L25632

1. Entity Name
JR CONCRETE, INC.



Principal Place of Business
% JOSEPH RAY
212 E. GARDENIA DR
ORANGE CITY, FL 32763

Mailing Address
1590 13TH ST
212 E. GARDENIA DR
ORANGE CITY, FL 32763 US



04042005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2973469

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent

RAY, JOSEPH
212 E. GARDENIA DR
ORANGE CITY, FL 32763

DO NOT WRITE
IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

1100000310814
04/18/05-80018-018 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RAY, JOSEPH
STREET ADDRESS	212 E GARDENIA DR.
CITY-ST-ZIP	ORANGE CITY, FL
TITLE	VPS
NAME	RAY, JO ELAINE
STREET ADDRESS	212 E GARDENIA DR.
CITY-ST-ZIP	ORANGE CITY, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH A. RAY
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/05 (386) 574-8488
Date Daytime Phone #