

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L37167

FILED
Mar 29, 2007
Secretary of State

Entity Name: SEMINOLE PRECAST, INC.

Current Principal Place of Business:

331 BENSON JUNCTION RD
DEBARY, FL 32713 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 531059
DEBARY, FL 327531059 US

New Mailing Address:

915 OUTER ROAD
SUITE 100
ORLANDO, FL 32814 US

FEI Number: 59-2985737

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEISWANDER, MARTIN
331 BENSON JUNCTION RD
DEBARY, FL 32713 US

Name and Address of New Registered Agent:

HESS, MIKE CPA
915 OUTER ROAD
SUITE 100
ORLANDO, FL 32814 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: MIKE HESS, CPA

03/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NEISWANDER, H. MARTIN
Address: 331 BENSON JUNCTION RD
City-St-Zip: DEBARY, FL 32713

Title: VPD () Delete
Name: NEISWANDER, CURTIS M.
Address: 331 BENSON JUNCTION RD
City-St-Zip: DEBARY, FL 32713

Title: STD () Delete
Name: NEISWANDER, PATRICIA A.
Address: 331 BENSON JUNCTION RD
City-St-Zip: DEBARY, FL 32713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CURTIS M. NEISWANDER

VPD

03/29/2007

Electronic Signature of Signing Officer or Director

Date