Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90038 043 \*\*\*150.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # L75953

1. Corporation Name

CONCRETE SERVICES OF QUINCY, INC.

1313 DADE ST OUINCY FL 32551 UIS  13251 UIS  133 Date Incorporated or Qualited  134 Telephone of Place							
OUINCY FL 32251 US	Principal Place	e of Business	Mailing Address				
US  US  3. Date Incorporated or Qualified US;24/1990 3. Date Incorporated or Qualified US;24/1990 4. FER Number 4. FER Number 59-3026130 1. Not Applicable For Required For Re	1131 DADE ST	HE4					
3. Oste Incorporation of Qualified (S)/24/1930  2. Principal Piace of Business 2. 2. Mailing Address 2. 2. Mailing Address 3. 4. FEI Number 59-3026130		131					DO NOT WRITE IN THIS SPACE
2. Principal Place of Busines   2. Mailing Address   3. Mailing Address   5. So-3026 130   5. Not Applicable For John Address   5. So-3026 130   5. Not Applicable For John Address   5. So-3026 130   5. Not Applicable For John Address   5. So-3026 130   5. Not Applicable For John Address   5. So-3026 130   5. Not Applicable For John Address   5. So-3026 130   5. Not Applicable For John Address   5. So-3026 130   5. Not Applicable For John Address   5. So-3026 130   5. Not Applicable For John Address   5. So-3026 130   5. Not Applicable For John Address   5. So-3026 130   5. Not Fund Controllation   5. Not Fund Controllation   5. So-3026 130   5. Not Fund Controllation   5. Not Fund Controllation   5. So-3026 130   5. Not Fund Controllation   5. Not Fund C							· •
Sulfa, Apt. #, etc.  Sulfa, Ap	2 Principal D	long of Business	2a Mailing Address				
Suits, Apt. R, etc.    Suits, Apt. R, etc.   27	¬ ·		— ·			, .	
Security		# etc.	20			<del></del>	_ \$8.75 Additional
City & State    City & State	¬ ''						5. Certificate of Status Desired  Fee Required
Zip   Country   Zip   Country   Zip   Country   S. This corporation were extracted again   Country   Zip   Country   S. Name and Address of Current Registered Agent   S. Name and Address of Current Registered Agent   S. Name and Address of New Registered Agent   S. Name and Address   S							6. Election Campaign Financing 55.00 May Be
Zip Country Zip Country	<del>_</del> ′		<b>├</b>				
9. Name and Address of Current Registered Agent  REDDICK, HILLIARD R 104-A ADAMS ST QUINCY FL 32351  11. Pursuant to the provisions of Sections 607.0502 and 607 1508. Florida Statutes.  12. Copyright of the state of Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered agent. I mentalize with, and accept the obligations of Section 607.0502 and 607 1508. Florida Statutes.  13. City T FL 85 Zip Code  14. Pursuant to the provisions of Sections 607.0502 and 607 1508. Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered agent. I mentalize with, and accept the obligations of Section 607.0505, Florida Statutes.  15. GNATURE  16. OFFICERS AND DIRECTORS 1 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. OFFICERS AND DIRECTORS 1 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. NAME  17. NAME  17. NAME  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. NAME  10. STREET ADDRESS  10. STREET ADDRESS  10. Change   Addition    10. NAME		Country	Zip Country				
Section   Sect	24			30			Personal Property Tax. Yes No
REDDICK, HILLIARD R 104-A ADAMS ST QUINCY FL 32351  82   Street Address (P.O. Box Number is Not Acceptable)  83   Street Address (P.O. Box Number is Not Acceptable)  84   City   FL   85   Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutios, the above-named corporation submits this statement for the purpose of changing its registered agant. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutios.  85   SIGNATURE   Signature type of primary type of the provisions of registered agant type or primary			nt Registered Agent			<del></del>	10. Name and Address of New Registered Agent
104-A ADAMS ST  QUINCY FL 32351  11. Pursuant to the provisions of Sections 807.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered open, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the approximent as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the approximent as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the approximent as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the approximent as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the approximent as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the approximent as registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the approximent as registered agent, or board of directors. I hereby accept the approximent as registered agent, and accept the approximent as registered agent, or board of directors. I hereby accept the approximent as registered agent, and accept the approximent as registered agent, and accept the approximent as registered agent, and accept the approximent are registered.  12. OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. ITILE  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			<del></del>	8	1	Name	
QUINCY FL 32351  83  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-harned corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hardby accept the appointment as registered agent, and accept the obligation of, Section 607.0505, Florida Statutes, the above-harned corporation submits this statement for the purpose of changing its registered agent, and accept the obligation of, Section 607.0505, Florida Statutes, the above-harned corporation's board of directors. I hardby accept the appointment as registered agent, and accept the obligation of, Section 607.0505, Florida Statutes, the above-harned corporation submits this statement for the purpose of changing its registered agent, and accept the obligation of, Section 607.0505, Florida Statutes, the above-harned corporation submits this statement for the purpose of changing its registered agent, and accept the obligation of, Section 607.0505, Florida Statutes, the above-harned corporation submits this statement for the purpose of changing its registered agent and accept the obligation of, Section 607.0505, Florida Statutes, the above-harned corporation submits this statement for the purpose of changing its registered agent and accept the obligation of, Section 607.0505, Florida Statutes, the above-harned corporation submits this statement for the purpose of changing its registered agent and accept the obligation of, Section 607.0505, Florida Statutes, the above-harned corporation submits this statement for the purpose of changing its registered agent and accept the obligation of, Section 607.0505, Florida Statutes, the above-harned corporation submits this statement for the purpose of changing its registered agent and accept the obligation of, Section 607.0505, Florida Statutes, the appointment as registered agent and accept the obligation of, Section 607.0505, F		•		8	2	Street Add	dress (P.O. Box Number is Not Acceptable)
11. Pursuant to the provisions of Sactions 607.0502 and 607.1508. Florida Statutos, the above-named corporation submits this statement for the purpose of changing its 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, 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 and the registered agent agent and the registered agent agent and the registered agent a				] 8	3		
The Provisions of Sections 607.0502 and 607.1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  To OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  DTS DELETE  11. TITLE  DTS DELETE  21. TITLE  DTS DELETE  22. CCTY-ST-ZP  DELETE  23. TITLE  DTS DELETE  24. CTY-ST-ZP  DELETE  24. CTY-ST-ZP  DELETE  24. TITLE  DTS DELETE  25. TITLE  DTS DELETE  25. TITLE  DTS DELETE  25. TITLE  DELETE  25. TITL					⇃		log 7in Code
office or registered agent, or both, in the State of Flonds, Such change was authorized by the corporation's board of directors. I nereby accept the application agent, and accept the obligations of Section 607 (505), Florids Statute's.    Signature   Signatu				\	-	•	FL   T
Signature operator prised name of registered agent and title it applicable. (NOTE-Roystend Agent suparative required when installating)   DATE	office or r agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was autitions of, Section 607.0505, Flori	thorized to da Statute	es.	ie corporati	tion's board of directors. I nereby accept the appointment as registered
TITLE DTS DELETE 1.1 TITLE   Change   Addition   NAME NCMILLAN, WILLIAM N JR   12 NAME   STREET ADDRESS   GUINCY FL 32351   Later Addition   NAME   PDCM					jent s	signature require	
MCMILLAN, WILLIAM N JR   12 NAME   13 STREET ADDRESS   CITY-ST-ZIP   CIMICY FL 32351   14 CITY-ST-ZIP   CIMICY FL 32351   14 CITY-ST-ZIP   CIMICY FL 32351   14 CITY-ST-ZIP   CIMICA SABRINA   22 NAME   CITY-ST-ZIP   CIMICA SABRINA   22 STREET ADDRESS   CITY-ST-ZIP   CIMICA SABRINA   CITY-ST-ZIP   CITICA SABRINA   CITY-ST-ZIP   CITY-ST-ZI					-		
STREET ADDRESS CITY-ST-ZP QUINCY FL 32351 TITLE PDCM MCMILLAN, SABRINA STREET ADDRESS CITY-ST-ZP QUINCY FL 22 NAME STREET ADDRESS CITY-ST-ZP QUINCY FL QUINC			☐ DELETE			Į	□ violito □ ·
CITY_ST_ZIP   QUINCY FL 32351							
TITLE							
NAME   MCMILLAN, SABRINA   22 NAME   23 STREET ADDRESS   CITY-ST-ZIP   QUINCY FL   24 CITY-ST-ZIP   QUINCY FL   Q				-		ZIP	☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP QUINCY FL  DV DELETE 3.1 TITLE DV NAME PARRAMORE, TONY 3.2 NAME STREET ADDRESS CITY-ST-ZIP QUINCY FL  3.3 STREET ADDRESS CITY-ST-ZIP TITLE DV Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE A.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME A.2 NAME A.3 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS							
CITY-ST-ZIP							and the second s
TITLE   DV   DELETE   3.1 TITLE   Change   Addition     NAME   PARRAMORE, TONY   3.2 NAME     STREET ADDRESS   102 N. WARD ST.   3.3 STREET ADDRESS     CITY-ST-ZIP   DELETE   DELETE   4.1 TITLE   Change   Addition     NAME   STREET ADDRESS   4.3 STREET ADDRESS     CITY-ST-ZIP   DELETE   DELETE   S.1 TITLE   Change   Addition     NAME   STREET ADDRESS   S.3 STREET ADDRESS     CITY-ST-ZIP   DELETE   DELETE   S.1 TITLE   Change   Addition     NAME   STREET ADDRESS     CITY-ST-ZIP   S.3 STREET ADDRESS     CITY-ST-ZIP   S.4 CITY-ST-ZIP     CHANGE   S.3 STREET ADDRESS     CITY-ST-ZIP   S.4 CITY-ST-ZIP     CHANGE   S.4 CITY						1	
NAME   PARRAMORE, TONY   32 NAME   33 STREET ADDRESS   102 N. WARD ST.   33 STREET ADDRESS   34 CITY-ST-ZIP   QUINCY FL   34 CITY-ST-ZIP   Change   Addition   A STREET ADDRESS   A STREET ADDRESS   A STREET ADDRESS   A STREET ADDRESS   A CITY-ST-ZIP   Addition   A CITY-ST-ZIP   A CITY			□ DELETE	_		ZIP	☐ Change ☐ Addition
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CITY-ST-ZIP   QUINCY FL   34. CITY-ST-ZIP						DDDEEG	
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A3 STREET ADDRESS   A4 CITY-ST-ZIP   A4 CITY-ST-ZIP   Change   Addition							<b>— · · ·</b>
A 4 CITY-ST-ZIP	<del>-</del>			1		nnoces.	•
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5.3 STREET ADDRESS							<u> </u>
SA CITY-ST-ZIP				1		DORESS	
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C A CODY CT ZID				6.3 STRE	ET A	DDRESS	
	CITY-ST-ZIP						

14. I hereby certify that the information supplied with this filling 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, with all other like empowered.