

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M71226

FILED
Apr 30, 2004
Secretary of State

Entity Name: ORLANDO PRECAST INC.

Current Principal Place of Business:

7561 AVON LAKE ROAD
LODI, OH 44540

New Principal Place of Business:

Current Mailing Address:

1202 DEER LAKE CIRCLE
APOPKA, FL 32712

New Mailing Address:

339 KENTUCKY BLUE CIRCLE
APOPKA, FL 32712

FEI Number: 59-2938586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNOTTS, SARAH MACK
1202 DEER LAKE CIRCLE
APOPKA, FL 32712 US

Name and Address of New Registered Agent:

KNOTTS, SARAH MACK
339 KENTUCKY BLUE CIRCLE
APOPKA, FL 32712 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: _____

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KNOTTS, SARAH MACK,
Address: 1202 DEER LAKE CIRCLE
City-St-Zip: APOPKA, FL

Title: D () Delete
Name: MACK, BARBARA,
Address: 201 COLUMBIA ROAD
City-St-Zip: VALLEY CITY, OH

Title: DS () Delete
Name: NESPECA, BETSY MACK,
Address: 7561 AVON LAKE ROAD
City-St-Zip: LODI, OH 44540

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KNOTTS, SARAH MACK,
Address: 339 KENTUCKY BLUE CIRCLE
City-St-Zip: APOPKA, FL

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 Section 119.07(3)(i), 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: SARAH MACK KNOTTS

DP

04/30/2004

Electronic Signature of Signing Officer or Director

Date