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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000004023 (6)

1. Corporation Name

PROFESSIONAL CONCRETE COATERS ASSOCIATION, INC.



Principal Place of Business

517 ENDERBY ROAD
CHULUOTA FL 32766

Mailing Address

517 ENDERBY ROAD
CHULUOTA FL 32766

3. Date Incorporated or Qualified
08/22/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-3347412

Applied For

Not Applicable

22

Suite, Apt. #, etc.

27

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23

City & State

28

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24

Zip

Country

29

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, HARRY W
517 ENDERBY ROAD
CHULUOTA FL 32766

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 617.0502 and 617.1508, 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 617.0503, 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 D ☐ DELETE
NAME MOSS, SANDY
STREET ADDRESS P.O. BOX 47003
CITY - ST - ZIP JACKSONVILLE FL 32247

TITLE D ☐ DELETE
NAME SMITH, HARRY W
STREET ADDRESS 517 ENDERBY ROAD
CITY - ST - ZIP CHULUOTA FL 32766

TITLE D ☐ DELETE
NAME ROBBINS, PAM
STREET ADDRESS 221 SCOTTSDALE LOOP
CITY - ST - ZIP LAKE LAND FL 33803

TITLE D ☐ DELETE
NAME KREAMER, VINCE
STREET ADDRESS 1809 HARBOR LANE
CITY - ST - ZIP NAPLES FL 33030

TITLE D ☐ DELETE
NAME GROHNERT, KLAUS
STREET ADDRESS 124 CUNNINGHAM DRIVE
CITY - ST - ZIP NEW SMYRNA BEACH FL 32168

TITLE D ☐ DELETE
NAME MULDER, SY
STREET ADDRESS 518 ARCHER LANE
CITY - ST - ZIP KISSIMMEE FL 34764

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

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5-1-96 OK

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/96

Date

107-365-5846

Daytime Phone #

CR2E037 (12/95)