

2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 01, 2004 8:00 am**  
**Secretary of State**

04-01-2004 90025 043 \*\*\*150.00

**DOCUMENT # P00000075443**

1. Entity Name  
**RIVERWALK CONCRETE & ALUMINUM, INC.**



Principal Place of Business  
**1800 SECOND STREET STE 965  
SARASOTA, FL 34236**

Mailing Address  
**1800 SECOND STREET STE 965  
SARASOTA, FL 34236**

34021000



2. Principal Place of Business  
**1800 SECOND STREET**

3. Mailing Address  
**1800 SECOND STREET**

Suite, Apt. #, etc.  
**SUITE 972**

Suite, Apt. #, etc.  
**SUITE 972**

03242004 Chg-P CR2E034 (10/03)

City & State  
**SARASOTA, FL**

City & State  
**SARASOTA, FL**

4. FEI Number  
**65-1032227**

Applied For  
Not Applicable

Zip  
**34236**

Country

Zip  
**34236**

Country

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

**8. Name and Address of Current Registered Agent**

**SPECTOR, RONALD L  
1800 SECOND STREET STE 965  
SARASOTA, FL 34236**

**7. Name and Address of New Registered Agent**

Name  
**GEORGE L. SPECTOR**  
Street Address (P.O. Box Number is Not Acceptable)  
**1800 SECOND STREET  
SUITE 972**  
City  
**SARASOTA FL** Zip Code  
**34236**

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, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SPECTOR, RONALD L	
STREET ADDRESS	1800 SECOND STREET STE 965	
CITY-ST-ZIP	SARASOTA, FL 34236	
TITLE	D	<input type="checkbox"/> Delete
NAME	SPECTOR, GEORGE L	
STREET ADDRESS	1800 SECOND ST. STE 965	
CITY-ST-ZIP	SARASOTA, FL 34236	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	D - P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HEATHER F. SPECTOR	
STREET ADDRESS	1800 SECOND STREET, STE. 972	
CITY-ST-ZIP	SARASOTA, FL 34236	
TITLE	D - VP - SEC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GEORGE L. SPECTOR	
STREET ADDRESS	1800 SECOND STREET, SUITE 972	
CITY-ST-ZIP	SARASOTA, FL 34236	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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:** George L. Spector **GEORGE L. SPECTOR**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/04  
Date

941-365-0969  
Daytime Phone #