

# 2001 UNIFORM BUSINESS REPORT (

**FILED**  
**May 11, 2001 8:00 am**  
**Secretary of State**

DOCUMENT # **P00000102860**

1. Entity Name

Keyes Concrete, Inc.

05-11-2001 90310 031 \*\*\*150.00

Principal Place of Business

Mailing Address

Michael Keyes & Denise King Concrete  
 523 Bristol Drive  
 Altamonte Springs, Fl 32714

**A0062320**

2. Principal Place of Business  
 same as above

3. Mailing Address  
 same as above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number  
 applied for

Zip

Country  
 USA

Zip

Country  
 USA

5. Certificate of Status Desired ☐

\$8.75  
 Fee Rec

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Frederic Stanley  
 Stanley, Dehlinger & Rascher  
 260 Maitland Ave, Suite 1500  
 Altamonte Springs, Fl 32701

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so. ☐  
 (See criteria on back)

**FILE NOW! FEE IS \$150.00**  
**After MAY 11, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

\$  
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11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
~~Michael Keyes, president~~ ☐ Delete  
~~523 Bristol Dr~~  
~~Altamonte Springs, Fl 32714~~

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
 Michael Keyes, president  
 523 Bristol Drive  
 Altamonte Springs, Fl 32714

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
~~Denise King, vice-president~~ ☐ Delete  
~~523 Bristol Dr~~  
~~Altamonte Springs, Fl 32714~~

TITLE  
 NAME  
 STREET ADDRESS  
 CITY - ST - ZIP  
 Denise King, vice-president  
 523 Bristol Drive  
 Altamonte Springs, Fl 32714

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13. 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 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Denise King J.P.*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**DENISE KING**

4-25-01