

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000064278

Entity Name: J.L. WILSON CONCRETE, INC.

FILED
Apr 28, 2004
Secretary of State

Current Principal Place of Business:

902 N PINE HILLS RD
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

902 N PINE HILLS RD
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 59-3723182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, CAROLYN
617 HUNTINGTON PINES DR
OCOE, FL 34761 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILSON, JAMES L
Address: 617 HUNTINGTON PINES DR
City-St-Zip: OCOEE, FL 34761

Title: VD () Delete
Name: WILSON, CAROLYN
Address: 617 HUNTINGTON PINES DR
City-St-Zip: OCOEE, FL 34761

Title: S () Delete
Name: MCCOY, LAROLYN
Address: 1015 NIGHT HAWK LANE #717
City-St-Zip: ORLANDO, FL 32818

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: WILSON, CAROLYN
Address: 617 HUNTINGTON PINES DR
City-St-Zip: OCOEE, FL 34761

Title: S (X) Change () Addition
Name: WILSON, TONETTE R
Address: 617 HUNTINGTON PINES DRIVE
City-St-Zip: OCOEE, FL 34761

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: CAROLYN WILSON

VP

04/28/2004

Electronic Signature of Signing Officer or Director

Date