

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90377 047 ***150.00

0565120 AV

DOCUMENT # P010000666.17

1. Entity Name
A-1 DESIGNS ON CONCRETE, INC.



Principal Place of Business
712 PLUM TREE LANE
SARASOTA FL 34243

Mailing Address
712 PLUM TREE LANE
SARASOTA FL 34243

*3225 45th Ave E
Bradenton FL, 34203*

*3225 45th Ave E
Bradenton FL, 34203*



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number: **65-1123571**

Applied For: Not Applicable

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

6. Name and Address of Current Registered Agent

WILLIAM H. KRODEL & ASSOC.
4437 CENTRAL AVENUE
ST. PETERSBURG FL 33713.

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> Delete
NAME	WITTY, ERIC J	
STREET ADDRESS	712 PLUM TREE LANE	
CITY-ST-ZIP	SARASOTA FL 34243	
TITLE	VSD	<input type="checkbox"/> Delete
NAME	WITTY, JAMES W III	
STREET ADDRESS	712 PLUM TREE LANE	
CITY-ST-ZIP	SARASOTA FL 34243	
TITLE	D	<input type="checkbox"/> Delete
NAME	OVERSTREET, HOWARD	
STREET ADDRESS	4806-A 22ND STREET, WEST	
CITY-ST-ZIP	BRADENTON FL 34207	
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		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<i>3225 45th Ave E</i>	
CITY-ST-ZIP	<i>Bradenton FL, 34203</i>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<i>3225 45th Ave E</i>	
CITY-ST-ZIP	<i>Bradenton FL, 34203</i>	
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: _____ **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-03 (941) 807-2015
Date Date/Time Phone #

CRP2E034 (10/02)