


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 10, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000090897 1. Entity Name EAGLE CONCRETE SYSTEMS, INC.	
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Principal Place of Business 3430 WILLARD ST FORT MYERS, FL 33916	Mailing Address PO BOX 60762 FORT MYERS, FL 33916
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DO NOT WRITE IN THIS SPACE



07012004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1139624	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LEANNAH, MICHAEL J 14619 EAGLES LOOKOUT CT FORT MYERS, FL 33912	DO NOT WRITE IN THIS SPACE
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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 \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS LEANNAH, MICHAEL J 14619 EAGLES LOOKOUT CT FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVT LEANNAH, CARMEL M 14619 EAGLES LOOKOUT CT FORT MYERS, FL 33912
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09/10/04-80001-014 550.00

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: Carmel M. Leannah 9/8/04 239-337-1972
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR CARMEL M. LEANNAH Date 9/8/04 Daytime Phone # 239-337-1972