

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVAL

FILED

06 JUL -3 AM 8:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # PD1000119798

1. Corporation Name

BUD'S CONCRETE INC.

2. Principal Office Address

6734 LAKEVILLE RD

Suite, Apt. #, etc.

City & State

ORLANDO FL

Zip

32818

Country

USA

3. Mailing Office Address

P.O. Box 550

Suite, Apt. #, etc.

City & State

SORRENTO FL

Zip

32776

Country

USA

**REINSTATEMENT** 04-06

CR2E081 (12/05)

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

59-3761234

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$5.75 Additional Fee required  
for a Certificate of Status

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

Name

JERRY RIDDELL JR.

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

105 MAGNOLIA LANE

Suite, Apt. #, Etc.

City

EUSTIS

State

FL

Zip Code

32726

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date 6/29/06

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	JERRY RIDDELL JR.	105 MAGNOLIA LANE	EUSTIS FL 32726
VP	JERRY RIDDELL III	140 HABERSHAM DR.	Longwood FL 32779
S/T	Tammy-Jo RIDDELL	105 MAGNOLIA LANE	EUSTIS FL 32726

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07/07/06--01024--024 \*\*1050.00

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Tammy-Jo RIDDELL  
Tammy-Jo Riddell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-29-06 407-832-6770

Date

Daytime Phone #

7/6/06