2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 15, 2008
Secretary of State

DOCUMENT# P02000017479

Entity Name: CUSTOM PAVERS, INC.

Current Principal Place of Business:

P. O. BOX 6154
JACKSONVILLE, FL 322366154

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 6154
JACKSONVILLE, FL 322366154

New Mailing Address:

FEI Number: 30-0055178 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLLINS, BRIAN M
2454 CEDAR SHORES CIRCLE
JACKSONVILLE, FL 32210 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: COLLINS, JULIE
Address: P. O. BOX 6154
City-St-Zip: JACKSONVILLE, FL 322366154

Title: VP ( ) Delete
Name: COLLINS, BRIAN
Address: P.O. BOX 6154
City-St-Zip: JACKSONVILLE, FL 322366154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: BRIAN M. COLLINS V.P. 05/15/2008

Electronic Signature of Signing Officer or Director — Date