



2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2004 8:00 am
Secretary of State

02-11-2004 90038 045 ***158.75

DOCUMENT # P03000004986 1. Entity Name MICHAEL BRITTON MIS. CONCRETE INCORPORATED					
Principal Place of Business POST OFFICE BOX 208 INTERCESSION, FL 33848-0208			Mailing Address POST OFFICE BOX 208 INTERCESSION, FL 33848-0208		
2. Principal Place of Business P.O. Box 208 Suite, Apt. #, etc.		3. Mailing Address P.O. Box 208 Suite, Apt. #, etc.			
City & State Intercession City FL		City & State Intercession City FL		4. FEI Number 54-2092970	
Zip 33848-0208		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required.	
6. Name and Address of Current Registered Agent A1A REGISTERED AGENT INC. 92 SADBERRY ROAD QUINCY, FL 32351-0000				7. Name and Address of New Registered Agent Name Dawn M. Britton Street Address (P.O. Box Number is Not Acceptable) 1413 Immokalee St P.O. Box 208 City Intercession City FL Zip Code 33848-0208	
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 <u><i>Dawn M. Britton</i></u> DATE <u><i>2/16/04</i></u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BRITTON, MICHAEL B POST OFFICE BOX 208 INTERCESSION, FL 338480208	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BRITTON, DAWN POST OFFICE BOX 208 INTERCESSION, FL 338480208	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: <u><i>Dawn M. Britton</i></u> <u><i>V.P.</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u><i>1/15/04</i></u> <u><i>407-468-9911</i></u> <small>Date Daytime Phone #</small>		