2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 31, 2005 8:00 am Secretary of State

ANNOAL ILLI OILI						•		•		
DOCUMENT # P03000081424							01-31-2005	90079 0	28 ***150	.00
1. Entity Name ADVANCED CONCRETE PUMPING INC										
						per			******	10773
Principal Place of Business & France of the Lat Mailing Address, July 1967 of the Late of Mailing Address, July 1967 of the Late of the La									มีบบเ	10613
714 ALBEE FARM RD N 714 ALBEE FARM RD N NOKOMIS, FL 34275						ų" •3, μ	1			•
NOROMID, FL 34273										,
C127 - 7.										
2. Principal Place of Business 3. Mailing Addr										l ij i [1]
Suite, Apt. #, etc.		Suite, Apt. #, etc.				01212005	Chg-P	CR2E	034 (10/03)	
City & State		City & State				4. FEI Number Applied For 20-0119076 Not Applicable				
Zip	Country	Zip	Coun	try			of Status Desired	Fee Hequired		
6. Name and Address of Current Registered Agent				Name		7. Name and	Address of New	Registered	Agent	
KNEPP, TRENTON									·	
714 ALBEE FARM NOKOMIS, FL 34			Street Address			(P.O. Box Number is Not Acceptable)				
NOROWIS, FE 34275										
				City		-		F	Zip Code	3
8. The above named er	ntity submits this statement	for the purpose of changing its	registers	L ed office or re	gistere	ed agent, or bo	oth, in the State of F			and accept
the obligations of registered agent.										
SIGNATURE										
Signature, typed or petited name of registered agent and itself applicable. (NOTE: Registered Agent signature required when relinativing) DATE 100.0000 100.000000 100.00000 100.00000 100.00000 100.00000 100.00000 100.00000 100.00000 100.00000 100.00000 100.00000 100.00000 100.00000 100.000000 100.00000 100.00000 100.00000 100.00000 100.00000 100.00000000										
FILE NOW!!! FEE IS \$150.00 St. Description Campaign Financing St.00 May Be Added to Fees										
10. OFFICERS AND DIRECTORS 11.							/CHANGES TO OF	FICERS AN	ID DIRECTORS	S IN 11
				E	•				_[] Change	Addition
NAMÉ. KNEPP, TRENTON SIREET ADDRESS 714 ALBEE FARM RD N			NAM SIRE	E ADDRESS						
!	MIS, FL 34275			- ST - ZIP						
TITLE		☐ Delete	mr	E S	Sec	11re	<u>as.</u>		Change	Addition
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CITY-ST-ZIP				-ST-ZIP	No	Komis	nepp farm Ro FC 34	275		
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CiTY-ST-ZIP	•			-ST-ZIP		•			-	
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STREET ADDRESS CITY-ST-ZIP			li i	-ST-ZIP						
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NAME	N		NAM	I .					- -	
STREET ADDRESS CHY-ST-ZIP	•			EET ADDRESS - St - ZIP						
12. I hereby certify that	t the information supplied w	ith this filing does not qualify to	or the exe	mption stated	in Se	ction 119.07/3)(i), Florida Statutes	. I further c	ertify that the in	nformation
12. I hereby certify that the information supplied with this filling does not quality 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 outly that it 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: 1-24-05 (941) 412-3239										
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Phone #										