2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Sep 13, 2004 8:00 am Secretary of State 08-24-2004 90001 048 ***150.00

DOCUMENT # P03000116668 1. Entity Name GREGG'S CONCRETE, INC.								08-24-20	04 9000	. 048	130.00
Principal Place of Business				Mailing Address]			· .	
1305 15TH AVENUE NORTH IACKSONVILLE BEACH, FL 32250				1305 15TH AVENUE NORTH Jacksonville Beach, FL 32250			66433543				
Principal Place of Business Amailing Address						-					
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Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.			08202004	Chg-P	CR2E0	34 (10/03)	
City & State			City	City & State			4. FEI Numb	-03234	79		pplied For x Applicable
Zip	1 .	Country	Zip		ntry	Certificate of Status Desired					
	6. Name and Address of Current Registered Agent 7. Name and Address of Naw Registered Agent										
DICKETTS	GPEGG	· 				_Name		- 			
RICKETTS, GREGG 1305 15TH AVENUE NORTH JACKSONVILLE BEACH, FL 32250						Street Address (P.O. Box Numb	er is Not Acceptab	le)		
	V 2 9				٠	City		i	FL	Zip Code	9
8. The above named entity submits this statement for the durpose 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 DATE PLATE											
	Signature, lyped	or printed name of register	ed agent and title if age	p¥cable. (NOTE	Registere	od Agent signeture required	when reinstating)		DATE		
FILE NOWIII FEE IS \$150.00 9. Election Campaign Financing Due by September 8, 2004 9. Election Campaign Financing Trust Fund Contribution. 9. Election Campaign Financing Added to Fees Corporation did not receive the prior notice.											
10.		OFFICER	S AND DIRECTO	DRS	. 11 <i>z</i>		ADDITIONS	/CHANGES TO OF	FICERS AND	DIRECTORS	5 IN 11
TITLE NAME	PDST	e cosco		☐ Delete	Int	i i				Change	Addition
STREET ADDRESS	RICKETTS, GREGG 1305 15TH AVENUE NORTH				NAV STRI	EET ADDRESS					· ·
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NAME	· ·				NAM	E					
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS '-ST-ZIP					ļ
	Certify that the	e information suppli	ed with this filling	does not qualify for			ction 119 07/21	(i) Florida Statutos	I further cert	ify that the in	formation
12. I hereby certify that the information supplied with this filling 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 cath; 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 afformation.											
SIGNATURE: Sept Hand 8 - 48 - 4											
SIGNATURE: Date Despire Proces of Director Date Date Director Date Director Date Date Date Date Date Date Date Date											ļ