

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000129614

Entity Name: SWIDER CONCRETE, INC.

FILED
Nov 24, 2009
Secretary of State

Current Principal Place of Business:

862 CARNATION AVE SE
PALM BAY, FL 32909

New Principal Place of Business:

Current Mailing Address:

862 CARNATION AVE SE
PALM BAY, FL 32909

New Mailing Address:

FEI Number: 20-0383488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWIDER, MICHAEL
862 CARNATION AVE SE
PALM BAY, FL 32909 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

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: SWIDER, MICHAEL
Address: 862 CARNATION AVE SE
City-St-Zip: PALM BAY, FL 32909

Title: DT () Delete
Name: SWIDER, PATTI
Address: 862 CARNATION AVE. SE
City-St-Zip: PALM BAY, FL 32909

Title: 2VP () Delete
Name: BORMAN, HENRY W III
Address: 460 IZORA AVE. NW
City-St-Zip: PALM BAY, FL 32907

Title: 1VP () Delete
Name: HAGGERTY, ROBERT
Address: 2724 FOUNTAIN HEAD BLVD
City-St-Zip: MELBOURNE, FL 32935

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: SWIDER, MICHAEL
Address: 862 CARNATION AVE SE
City-St-Zip: PALM BAY, FL 32909 US

Title: DT (X) Change () Addition
Name: SWIDER, PATTI
Address: 862 CARNATION AVE. SE
City-St-Zip: PALM BAY, FL 32909 US

Title: 2VP (X) Change () Addition
Name: SCHARDSMIDT, JERVIS
Address: 713 TARR AVE SW
City-St-Zip: PALM BAY, FL 32908 US

Title: 1VP (X) Change () Addition
Name: HAGGERTY, ROBERT
Address: 2724 FOUNTAIN HEAD BLVD
City-St-Zip: MELBOURNE, FL 32935 US

Title: 3VP () Change (X) Addition
Name: RUSSELL, HARRY
Address: 2041 AGORA CIRCLE SE
City-St-Zip: PALM BAY, FL 32909 US

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: PATTI SWIDER

DT

11/24/2009

Electronic Signature of Signing Officer or Director

Date