2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 25, 2004 8:00 am Secretary of State DOCUMENT # P03000158029 1. Entity Name 03-25-2004 90023 040 ***150.00 JERRY'S CONCRETE CONSTRUCTION, INC. Principal Place of Business Mailing Address 54674 CHURCH RD CALLAHAN FL 32011 54674 CHURCH RD CALLAHAN FL 32011 2. Principal Place of Business 3. Mailing Address 54674 Church Rd. 54674 Church R Suite, Apt. #, etc MOORE CR2E034 (11/03) City & State 4. FEI Number Applied For allahan 14-1801015 Not Applicable \$8.75 Additional 5. Certificate of Status Desired <u>32011</u> Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROTHSTEIN, SETH L Street Address (P.O: Box Number is Not Acceptable) 4417 BEACH BLVD SUITE 104 JACKSONVILLE FL 32207 Zip Code 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. (NOTE, Registered Agent signature required when reinstation) FILE NOW!!! FEE IS \$150.00 9. Election Campaion Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PTD TITLE TITLE ☐ Change ☐ Addition ☐ Delete DAUGHTRY, JERALD W NAME NAME STREET ADDRESS 54674 CHURCH RD STREET ADDRESS CALLAHAN FL 32011 CITY-ST-ZIP CITY-ST-ZIP Delete SD TITLE TITLE Change ☐ Addition DAUGHTRY, WANDA NAME NAME 54674 CHURCH RD STREET ADDRESS STREET ADDRESS CALLAHAN FL 32011 CITY-ST-ZIP City-St-7/P TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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.

SIGNING OFFICER OR DIRECTOR

FILED