2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005
Secretary of State

DOCUMENT# P04000012202

Entity Name: WILLIAM JOHNSON CONCRETE SERVICES, INC.

Current Principal Place of Business:

1315 VERMONT AVE
ST. CLOUD, FL 34769

New Principal Place of Business:

Current Mailing Address:

1315 VERMONT AVE
ST. CLOUD, FL 34769

New Mailing Address:

FEI Number: 11-3712200 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, WILLIAM F JR.
1315 VERMONT AVE
ST. CLOUD, FL 34769 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: JOHNSON, WILLIAM F JR.
Address: 1315 VERMONT AVE
City-St-Zip: ST. CLOUD, FL 34769

Title: VD (X) Delete
Name: EADY, RANDY
Address: 1724 CRAWFORD STREET
City-St-Zip: ST. CLOUD, FL 34769

Title: VD ( ) Delete
Name: BACON, ANTHONY
Address: 723 PENNSYLVANIA STREET
City-St-Zip: ST. CLOUD, FL 34769

Title: STD (X) Delete
Name: JOHNSON, PAULA
Address: 1315 VERMONT AVENUE
City-St-Zip: ST. CLOUD, FL 34769

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: WILLIAM JONHSON PRES 04/18/2005

Electronic Signature of Signing Officer or Director — Date