

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000097932

Entity Name: CONCRETE MOBILE MIX INC

FILED  
Apr 24, 2008  
Secretary of State

## Current Principal Place of Business:

101 ELMWOOD RD  
DEFUNIAK SPRINGS, FL 32433

## New Principal Place of Business:

## Current Mailing Address:

101 ELMWOOD RD  
DEFUNIAK SPRINGS, FL 32433

## New Mailing Address:

FEI Number: 20-3138257

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BAILEY, PATRICK T P  
101 ELMWOOD RD  
DEFUNIAK SPRINGS, FL 32433 US

## Name and Address of New Registered Agent:

BAILEY, PATRICK T MR  
101 ELMWOOD RD  
DEFUNIAK SPRINGS, FL 32433 US

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: PATRICK T BAILEY

04/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BAILEY, PATRICK  
Address: 101 ELMWOOD ROAD  
City-St-Zip: DE FUNIAK SPRINGS, FL 32433

Title: VP ( ) Delete  
Name: HAMMONDS, LAURA  
Address: 101 ELMWOOD ROAD  
City-St-Zip: DE FUNIAK SPRINGS, FL 32433

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: BAILEY, PATRICK T MR  
Address: 101 ELMWOOD ROAD  
City-St-Zip: DE FUNIAK SPRINGS, FL 32433

Title: P (X) Change ( ) Addition  
Name: HAMMONDS, LAURA M MS  
Address: 101 ELMWOOD ROAD  
City-St-Zip: DE FUNIAK SPRINGS, FL 32433

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: LAURA M HAMMONDS

P

04/24/2008

Electronic Signature of Signing Officer or Director

Date