2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 05, 2007 8:00 am Secretary of State 04-05-2007 90136 033 ***150.00

DOCUMENT # P06000025059 1. Entity Name KIRKPATRICK CONCRETE SERVICES, INC										136 033 ***1	50.00	
Principal Place of Business 3 131 CLARK ROAD SUITE 202 - SARASOTA, FL 34231			Mailing Address 3 131-CLARK ROA D S UITE 202 - SARASOTA, FL			-	40050700					
2. Principal P 455 Suite, Apt.	53 No	ess - No P.O. Box# RNINGSIDE	3. Mailing Address 4553 MORNINGSILE Suite, Apt. #, etc.			P	02142007	Chg-P		R2E034 (12/06) ²	4	
Swassta F/			SARASOTA	=/		4. FEI Numb 20 -	er 433	7019	Ap	plied For t Applicable		
342			3°4235	Coun	SA			of Status De	,	\$8.75 Add Fee Required		
6. Name and Address of Current Registered Agent												
HARRIS, GARY P 3 131 CLARK ROA D						Gerald Bishop Street Address (P.O. Box Number is Not Acceptable) 2831 Ringling Blvd. #218F						
SUITE-202 SARASOT					asota,							
City							Sa R	1501a ,	<u> </u>	FL 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.												
SIGNATURE Signation, typed or printed name of registered agent and title if applicable. [NOTE: Registered Agent signature required when reinstating) DATE												
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FIL After Ma	E NOW!!! ay 1, 2007	FEÉ IS \$150,00 / Fe e will be \$550.(-			O May Be I to Fees					
10.	OFFICERS AND DIRECTORS						ADDITIONS	L /CHANGES T	O OFFICERS	AND DIRECTORS	S IN 11	
TITLE NAME	P KIRKPATI	☐ Delete	TITLE						☐ Change	☐ Addition		
STREET ADDRESS	4553 MOF		STRE	ET ADDRESS								
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Siguites. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall take the same legal effect as if practy 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 107, 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. SIGNATURE: **Containing the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Siguites. I further certify that the information indicated on this report as required by Chapter 107, 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. SIGNATURE: **Containing the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report as the information in Chapter 119. Florida Statutes are formed in the information in Chapter 119. Florida Statutes in the information in Chapter 119												
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