

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000115465

FILED
Apr 05, 2011
Secretary of State

Entity Name: PRECAST FIELD SERVICES CO.

Current Principal Place of Business:

9540 SAN JOSE BOULEVARD
JACKSONVILLE, FL 32257

New Principal Place of Business:

Current Mailing Address:

9540 SAN JOSE BOULEVARD
JACKSONVILLE, FL 32257

New Mailing Address:

PO BOX 23627
JACKSONVILLE, FL 32241 US

FEI Number: 26-1277767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCORMACK, JAMES E
9540 SAN JOSE BOULEVARD
JACKSONVILLE, FL 32257 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: D
Name: LUKE, JOSEPH C
Address: 9540 SAN JOSE BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32257

Title: DVP
Name: SHIMP, EARL N III
Address: 9540 SAN JOSE BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32257

Title: DP
Name: GWIN, DEAN O
Address: 9540 SAN JOSE BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32257

Title: S
Name: MCCORMACK, JAMES E
Address: 9540 SAN JOSE BOULEVARD
City-St-Zip: JACKSONVILLE, FL 32257

Title: VPT
Name: LUEDERS, JACK C JR
Address: 9540 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32257

I hereby 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 all other like empowered.

SIGNATURE: JAMES E MCCORMACK

SEC

04/05/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date