

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000044059

FILED
Apr 26, 2011
Secretary of State

Entity Name: FISHER AGGREGATE SUPPLY INC.

Current Principal Place of Business:

145 OAKWOOD DRIVE
NAPLES, FLORIDA, 34110 US

New Principal Place of Business:

145 OAKWOOD DRIVE
NAPLES, FLORIDA, FL 34110 US

Current Mailing Address:

145 OAKWOOD DRIVE
NAPLES, FLORIDA, 34110 US

New Mailing Address:

145 OAKWOOD DRIVE
NAPLES, FLORIDA, FL 34110 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FISHER, THOMAS C
145 OAKWOOD DRIVE
NAPLES, FL 34110 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: P
Name: FISHER, THOMAS C
Address: 145 OAKWOOD DRIVE
City-St-Zip: NAPLES, FL 34110 US

Title: T
Name: FISHER, THOMAS C
Address: 145 OAKWOOD DRIVE
City-St-Zip: NAPLES, FL 34110 US

Title: VP
Name: FISHER, MARY B
Address: 145 OAKWOOD DRIVE
City-St-Zip: NAPLES, FL 34110 US

Title: S
Name: FISHER, MARY B
Address: 145 OAKWOOD DRIVE
City-St-Zip: NAPLES, FL 34110 US

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: THOMAS C. FISHER

P

04/26/2011

Electronic Signature of Signing Officer or Director

Date