

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 12 1997 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|---|---|---|

DOCUMENT # **P19863** (0)
1. Corporation Name
VULCAN GULF COAST MATERIALS, INC.



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| Principal Place of Business ONE METROPLEX DRIVE CORPORATE TAX DEPT. BIRMINGHAM AL 35253-0187 | Mailing Address ONE METROPLEX DRIVE CORPORATE TAX DEPT.. BIRMINGHAM AL 35209-6805 |
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|--|------------------------|---|--|--|--|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified 06/28/1988 | 3a. Date of Last Report 05/01/1996 |
| 21 Suite, Apt. #, etc. P.O. BOX 530187 | 26 Suite, Apt. #, etc. | 4. FEI Number 63-0964180 | | Applied For Not Applicable | |
| 22 City & State | 27 City & State | 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 23 Zip | 28 Zip | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| 24 Country | 25 Country | 29 Country | | 30 Country | |
| 25 Country | | 29 Country | | 30 Country | |

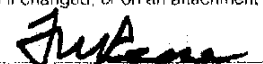
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|---|--|---|--|
| 9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC 1201 HAYES STREET STE - 105 TALLAHASSEE FL 32301 | | 10. Name and Address of New Registered Agent | |
| 81 Name | | 82 Street Address (P.O. Box Number is Not Acceptable) | |
| 83 | | 84 City | |
| 85 Zip Code | | FL | |

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|--|---|---|
| TITLE | CD <input checked="" type="checkbox"/> DELETE | 1.1 TITLE | C/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | GRAYSON, W.J. JR. | 1.2 NAME | P. J. CLEMENS, III |
| STREET ADDRESS | 3805 KNOLLWOOD LANE | 1.3 STREET ADDRESS | 5680 CAHABA VALLEY ROAD |
| CITY-ST-ZIP | BIRMINGHAM AL 35209 | 1.4 CITY-ST-ZIP | BIRMINGHAM, AL 35243 |
| TITLE | PC <input type="checkbox"/> DELETE | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | RANDELL, T.R. | 2.2 NAME | |
| STREET ADDRESS | 1105 S. COVE CIRCLE | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | BIRMINGHAM AL 35209 | 2.4 CITY-ST-ZIP | |
| TITLE | DVAT <input type="checkbox"/> DELETE | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | SANSONE, D F | 3.2 NAME | |
| STREET ADDRESS | 2856 VESCLUB CIRCLE | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | BIRMINGHAM AL 35209 | 3.4 CITY-ST-ZIP | |
| TITLE | V <input type="checkbox"/> DELETE | 4.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | PEASE, J.D. III | 4.2 NAME | 9318 DEER CREEK DRIVE |
| STREET ADDRESS | 5525 CAMERON FOREST PKWY. | 4.3 STREET ADDRESS | TAMPA, FL 33647-2286 |
| CITY-ST-ZIP | ALPHARETTA GA 30202 | 4.4 CITY-ST-ZIP | |
| TITLE | VAS <input type="checkbox"/> DELETE | 5.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | SYDNOR, E. S. | 5.2 NAME | 1404 MORNINGSIDE DRIVE |
| STREET ADDRESS | 3851 DUNBARTON DR. | 5.3 STREET ADDRESS | BIRMINGHAM, AL 35213 |
| CITY-ST-ZIP | BIRMINGHAM AL 35209 | 5.4 CITY-ST-ZIP | |
| TITLE | VSD <input type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | DENSON, W.F. III | 6.2 NAME | |
| STREET ADDRESS | 3215 BRIARCLIFF RD | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | BIRMINGHAM AL 35209 | 6.4 CITY-ST-ZIP | |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **T. W. REESE** ASSISTANT TREASURER 4/30/97 (205) 877-3153

CR2E034 (9/96)