2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2004
Secretary of State

DOCUMENT# P93000020070

Entity Name: CAC AGGREGATES, INC.

Current Principal Place of Business:

11199 POLO CLUB ROAD
WELLINGTON, FL 33414

New Principal Place of Business:

11198 POLO CLUB ROAD
WELLINGTON, FL 33414

Current Mailing Address:

11199 POLO CLUB ROAD
WELLINGTON, FL 33414

New Mailing Address:

11198 POLO CLUB ROAD
WELLINGTON, FL 33414

FEI Number: 65-0394797 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GALLE, CRAIG
11199 POLO CLUB ROAD
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

GALLE, CRAIG ESQ.
11198 POLO CLUB ROAD
WELLINGTON, FL 33414 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: CRAIG GALLE 01/08/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: STRAUB, GLENN F
Address: 11199 POLO CLUB ROAD
City-St-Zip: WELLINGTON, FL 33414

Title: ST ( ) Delete
Name: SKINNER, HAROLD S
Address: 11199 POLO CLUB ROAD
City-St-Zip: WELLINGTON, FL 33414

Title: S ( ) Delete
Name: GALLE, CRAIG T
Address: 11199 POLO CLUB ROAD
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: STRAUB, GLENN F
Address: 11198 POLO CLUB ROAD
City-St-Zip: WELLINGTON, FL 33414

Title: T (X) Change ( ) Addition
Name: SKINNER, HAROLD S
Address: 11198 POLO CLUB ROAD
City-St-Zip: WELLINGTON, FL 33414

Title: S (X) Change ( ) Addition
Name: GALLE, CRAIG T
Address: 11198 POLO CLUB ROAD
City-St-Zip: WELLINGTON, FL 33414

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CRAIG GALLE S 01/08/2004
Electronic Signature of Signing Officer or Director Date