

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montemayor
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR -5 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000055584 (4)**

1. Corporation Name

SOUTHEAST CONCRETE PUMPING, INC.

Principal Place of Business

6220 S. LAGOON DRIVE
PANAMA CITY BEACH FL 32408

Mailing Address

6220 S. LAGOON DRIVE
PANAMA CITY BEACH FL 32408

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/27/1994

3a. Date of Last Report

2. Principal Place of Business

21 **1528 MOYLAN RD**

2a. Mailing Address

26 **6220 S. LAGOON DR**

4. FEI Number

59-324 237

Applicant For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 **PANAMA City FL**

City & State

28 **PANAMA City FL**

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

24 **32408** 25 **BA**

Zip

Country

29 **32408** 30 **BA**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**WALKER, JAMES D
6220 S. LAGOON DRIVE
PANAMA CITY BEACH FL 32408**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

James D. Walker, JAMES D. WALKER, President

4/2/95

(Signature, typed or printed name of registered agent and date of application)

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PT**
NAME **WALKER, JAMES D**
STREET ADDRESS **6220 S. LAGOON DRIVE**
CITY- ST- ZIP **PANAMA CITY BEACH FL 32408**

TITLE **VS**
NAME **WALKER, NANCY E**
STREET ADDRESS **6220 S. LAGOON DRIVE**
CITY- ST- ZIP **PANAMA CITY BEACH FL 32408**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(4)(b), 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 887, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an addendum.

SIGNATURE:

James D. Walker, JAMES D. WALKER

4/2/95

904.230.9427

(Signature and typed or printed name of signing officer or director)

(Date)

(Telephone Number)