

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 21, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000025595

1. Entity Name
CUMBIE CONCRETE COMPANY



Principal Place of Business
**4871 WOODLANE CIRCLE
TALLAHASSEE, FL 32303**

Mailing Address
**4871 WOODLANE CIRCLE
TALLAHASSEE, FL 32303**

DO NOT WRITE IN THIS SPACE



01102005 000000 000000000000

4. FEI Number
59-3321747

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** 00000000
0000000000

6. Name and Address of Current Registered Agent

**UTTER, TERRY K
4871 WOODLANE CIR
TALLAHASSEE, FL 32303**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** 000000
0000000000

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
CUMBIE, B.T.
8649 COACH ROAD
TALLAHASSEE, FL 32308**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVP
CUMBIE, DORIS
8649 COACH RD
TALLAHASSEE, FL 32308**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPDO
SMITH, ALEX H
6517 SAYLERS CREEK ROAD
TALLAHASSEE, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
UTTER, TERRY K
1312 NYLIC STREET #D
TALLAHASSEE, FL 323042191**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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02/21/05-80047-024 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: **Terry K Utter**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/17/05 **562 3239**

Date Daytime Phone #