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Apr 25, 2005 08:00 AM
Secretary of State

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P96000006605

1. Entity Name
FLORIDA CONCRETE, INC.



Principal Place of Business
1200 DEER RUN CT
LAKE HELEN, FL 32744 US

Mailing Address
P O BOX 147
LAKE HELEN, FL 32744 US



01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3360653

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

B. Name and Address of Current Registered Agent

COSTELLO, JOHN F
1200 DEER RUN CT
LAKE HELEN, FL 32744

**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

Michelle A Costello

4/19/05

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when resigning)

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 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COSTELLO, JOHN F 1200 DEER RUN CT LAKE HELEN, FL 32744
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COSTELLO, MICHELLE A 1200 DEER RUN CT LAKE HELEN, FL 32744
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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04/25/05-80085-024 150.00

**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)(f), 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 it 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:

Michelle A Costello

4/19/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #