

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

FILED

May 02 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000011500 (1)**

1. Corporation Name  
**BDN CONCRETE, INC.**

Principal Place of Business

**4555 SOUTH STREET  
TITUSVILLE FL 32780**

Mailing Address

**4555 SOUTH STREET  
TITUSVILLE FL 32780-2827**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 <b>4555 South Street</b>		26 <b>Same</b>		02/01/1996			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22		27		59-3379111		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 <b>Titusville, FL</b>		28		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Country		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
24 <b>32780</b>		25 <b>Brevard</b>		29		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>NELSEN, BRUCE D 4555 SOUTH STREET TITUSVILLE FL 32780</b>				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: \_\_\_\_\_ DATE: **4-21-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b>	1.1 TITLE	<b>V. Pres.</b>
NAME	<b>NELSEN, BRUCE D</b>	1.2 NAME	<b>Jeffrey Bass</b>
STREET ADDRESS	<b>4175 FOX LAKE ROAD</b>	1.3 STREET ADDRESS	<b>4555 South Street</b>
CITY-ST-ZIP	<b>TITUSVILLE FL 32798</b>	1.4 CITY-ST-ZIP	<b>Titusville, FL 32780</b>
TITLE		2.1 TITLE	<b>Treasurer</b>
NAME		2.2 NAME	<b>Thomas Rudolph</b>
STREET ADDRESS		2.3 STREET ADDRESS	<b>4555 South Street</b>
CITY-ST-ZIP		2.4 CITY-ST-ZIP	<b>Titusville, FL 32780</b>
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 change or on an attachment with an address.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4-21-97 407-2688419**

Date

Daytime Phone #

CR2E034 (9/96)