

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

FILED
Apr 14 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000032410 (8)

1. Corporation Name

CONCRETE PLACING & FINISHING, INC.



Principal Place of Business

Mailing Address

5851 WASHINGTON STREET
NAPLES FL 33942

5851 WASHINGTON STREET
NAPLES FL 33942

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/09/1996

4. FEI Number

65-0686327

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 5851 WASHINGTON ST

26 5851 WASHINGTON ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 NAPLES FL

28 NAPLES FL

24 Zip Country

29 Zip Country

34109

34109

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ORTENGREN, TRACY K
4650 SANTIAGO LANE
BONITA SPRINGS FL 32923

81 Name

ORTENGREN, TRACY K

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

20650 GROVELINE CT

83

BONITA SPRINGS

84 City

FL

85 Zip Code

34133

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME ORTENGREN, TRACY K
STREET ADDRESS 4650 SANTIAGO LANE
CITY-ST-ZIP BONITA SPRINGS FL 32923

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME ORTENGREN, TRACY K
1.3 STREET ADDRESS 20650 GROVELINE CT
1.4 CITY-ST-ZIP BONITA SPRINGS, FL 34133

TITLE ☐ DELETE

NAME BOLOGNESE, DANIEL J
STREET ADDRESS 5851 WASHINGTON STREET
CITY-ST-ZIP NAPLES FL 33942

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME VICE PRESIDENT
2.3 STREET ADDRESS BOLOGNESE, DANIEL J
2.4 CITY-ST-ZIP 5851 WASHINGTON ST
NAPLES FL 34109

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 assignor 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 changed, or on an attachment with an address.

SIGNATURE:

[Signature]

4-8-98 (941) 514-1441

CR2E034 (10/97)