

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

FILED  
May 18 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 # P96000035101 (0)

1. Corporation Name

A W CONCRETE SERVICES, INC.



Principal Place of Business

1515 FT CHRISTMAS RD  
CHULUOTA FL 32766

Mailing Address

1515 FT CHRISTMAS RD  
CHULUOTA FL 32766

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/19/1996

4. FEI Number

59-3378273

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

21 1155 Lake Harney Rd

Suite, Apt. #, etc.

22 Geneva FL

City & State

23 32732

Zip

Country

24 Semnole

25

2a. Mailing Address

26 1155

Suite, Apt. #, etc.

27 P.O. Box 1129

City & State

28 Geneva FL

Zip

Country

29 32732

30

Semnole

9. Name and Address of Current Registered Agent

WILCHAR, AMY  
1515 FT CHRISTMAS RD  
CHULUOTA FL 32766

10. Name and Address of New Registered Agent

81 Name

David Wilchar

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

1155 Lake Harney Rd

83 Geneva FL

84 City

FL

85

Zip Code

32732

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]*

David Wilchar Pres.

4-29-98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPTS  
NAME WILCHAR, AMY  
STREET ADDRESS 1515 FT CHRISTMAS RD  
CITY-ST-ZIP CHULUOTA FL 32766

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE T.S.  
12 NAME Amy Wilchar  
13 STREET ADDRESS 1155 Lake Harney Rd  
14 CITY-ST-ZIP Geneva FL 32732

☒ Change ☐ Addition

21 TITLE D.P.  
22 NAME David Wilchar  
23 STREET ADDRESS 1155 Lake Harney Rd  
24 CITY-ST-ZIP Geneva FL 32732

☐ Change ☒ Addition

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

☐ Change ☐ Addition

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 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 changed, or on an attachment with an address.

CR2E034 (10/97)