

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000038838

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** AGGREGATE PRODUCTS, INC.

**Current Principal Place of Business:**

9678 SW SR 121  
LAKE BUTLER, FL 32054

**New Principal Place of Business:**

**Current Mailing Address:**

HIGHWAY 121 SOUTH  
P O BOX 506  
LAKE BUTLER, FL 32054

**New Mailing Address:**

P O BOX 506  
LAKE BUTLER, FL 32054

**FEI Number:** 59-3580330

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DRIGGERS, CASSANDRA  
9678 SW SR 121  
LAKE BUTLER, FL 32054 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** SHADD, JOHN L  
**Address:** 9678 SW SR 121  
**City-St-Zip:** LAKE BUTLER, FL 32054

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** JOHN L SHADD

P

04/27/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date