2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000092724

Entity Name: DOWELL AGGREGATE, INC.

FILED Feb 18, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1200 WEST STATE ROAD 434 656 FL. CENTRAL PARKWAY SUITE 124 LONGWOOD, FL 32750

LONGWOOD, FL 32750

LONGWOOD, FL 32750

Current Mailing Address: New Mailing Address:

1200 WEST STATE ROAD 434 656 FL. CENTRAL PARKWAY SUITE 124 LONGWOOD, FL 32750

FEI Number: 59-3474768 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DOWELL, MICHAEL S.

1200 W STATE ROAD 434

STE 124

LONGWOOD, FL 32750 US

DOWELL, MICHAEL S.

656 FL. CENTRAL PARKWAY
LONGWOOD, FL 32750 US

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: 02/18/2010

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD

Name: DOWELL, DAVID R

Address: 656 FL. CENTRAL PARKWAY
City-St-Zip: LONGWOOD, FL 32750

Title: VD

Name: DOWELL, DEBRA C

Address: 656 FL. CENTRAL PARKWAY
City-St-Zip: LONGWOOD, FL 32750

Title: VD

Name: DOWELL, SHARON

Address: 656 FL. CENTRAL PARKWAY City-St-Zip: LONGWOOD, FL 32750

Title: STD

Name: DOWELL, MICHAEL S Address: 656 FL. CENTRAL PARKWAY City-St-Zip: LONGWOOD, FL 32750

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: MICHAEL S DOWELL MSD 02/18/2010