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PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000108741 (4)

THOMPSON CONCRETE FINISHING, INC.

FILED May 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 7731 NW 21ST DRIVE 7731 NW 21ST DRIVE GAINESVILLE FL 32653 GAINESVILLE FL 32653 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/29/1997 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 59-3486597 Not Applicable <u> P.O. BOX 6056</u> 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 <u>Gaine Buille</u> Zip Country 8. This corporation owes or has paid the current year Intangible 29 32627-6056 30 U S Personal Property Tax due June 30. Yes 24 25 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name THOMPSON, JOHN B 7731 NW 21ST DRIVE Street Address (P.O. Box Number is Not Acceptable) **GAINESVILLE FL 32653** 83 85 Zip Code 84 City 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 like if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition PRESIDENT DELETE 1.1 TITLE TITLE PRESIDENT JOHN B. THOMPSON JOHN B. THOMPSON NAME 1.2 NAME 7731 NW 21ST DRIVE 7731 NW. 2151 DRINE STREET ADDRESS 1.3 STREET ADDRESS FAMESVILLE, FL 32653 bainesville, FL 32653 1.4 CiTY-ST-7IP CITY - ST - ZIP Change Addition DELETE TITLE 21 TITLE NAME 22 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition T DELETE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CiTY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change ___ Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY - ST - ZIP CITY-ST-ZIP

14. I hereby certily 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.

20/27/00 (352)337-3116