

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 31, 2006 8:00 am**  
**Secretary of State**

03-31-2006 90012 024 \*\*\*150.00

<b>DOCUMENT # P98000046811</b>						
<b>1. Entity Name</b> SUMTER CONCRETE PUMPING, INC.						
<b>Principal Place of Business</b> 108 MAGNOLIA AVENUE CENTER HILL, FL 33514			<b>Mailing Address</b> PO BOX 665 CENTER HILL, FL 33514			
<b>2. Principal Place of Business</b> 2672 SE 35 <sup>th</sup> Street Suite, Apt. #, etc.		<b>3. Mailing Address</b> P.O. Box 508 Suite, Apt. #, etc.				
<b>City &amp; State</b> Sumterville FL		<b>City &amp; State</b> Sumterville, FL		<b>4. FEI Number</b> 59-3517297		
<b>Zip</b> 33585		<b>Country</b> USA		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		
<b>6. Name and Address of Current Registered Agent</b>  ROBERTS, JOHN MICHAEL 108 MAGNOLIA AVENUE CENTER HILL, FL 33514			<b>7. Name and Address of New Registered Agent</b> <b>Name</b> John Michael Roberts <b>Street Address (P.O. Box Number is Not Acceptable)</b> 2672 SE 35 <sup>th</sup> Street <b>City</b> Sumterville, <b>FL</b> <b>Zip Code</b> 33585			
<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b> <b>SIGNATURE:</b> <i>X John M Roberts</i> <span style="float: right;"><b>3/26/06</b></span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>						
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>			<b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>			
<b>TITLE</b> D	<b>NAME</b> ROBERTS, JOHN MICHAEL		<input type="checkbox"/> Delete	<b>TITLE</b> D	<b>NAME</b> ROBERTS, JOHN MICHAEL	
<b>STREET ADDRESS</b> 108 MAGNOLIA AVENUE	<b>CITY-ST-ZIP</b> CENTER HILL, FL 33514		<input type="checkbox"/> Change <input type="checkbox"/> Addition	<b>STREET ADDRESS</b> 2672 SE 35 <sup>th</sup> Street	<b>CITY-ST-ZIP</b> Sumterville, FL 33585	
<b>TITLE</b> D	<b>NAME</b> ROBERTS, TAMMY JEAN		<input type="checkbox"/> Delete	<b>TITLE</b> D	<b>NAME</b> ROBERTS, TAMMY JEAN	
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<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b>						
<b>SIGNATURE:</b> <i>X John M Roberts</i>			<b>3/26/06</b>		<b>352-267-8816</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR John M Roberts			Date		Daytime Phone #	