

P98000083936

Requester's Name  
 P.O. BOX 1829  
 Address  
 LAKE CITY, FL 32056  
 City/State/Zip Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

- \_\_\_\_\_  
 (Corporation Name) (Document #) 400004666344--5  
 -11/05/01--01063--023  
 \*\*\*\*\*35.00 \*\*\*\*\*35.00
- \_\_\_\_\_  
 (Corporation Name) (Document #)
- \_\_\_\_\_  
 (Corporation Name) (Document #)
- \_\_\_\_\_  
 (Corporation Name) (Document #)

- Walk in     Pick up time \_\_\_\_\_     Certified Copy  
 Mail out     Will wait     Photocopy     Certificate of Status

**NEW FILINGS**

- Profit  
 Not for Profit  
 Limited Liability  
 Domestication  
 Other

**AMENDMENTS**

- Amendment  
 Resignation of R.A., Officer/Director  
 Change of Registered Agent  
 Dissolution/Withdrawal  
 Merger

**OTHER FILINGS**

- Annual Report  
 Fictitious Name

**REGISTRATION/QUALIFICATION**

- Foreign  
 Limited Partnership  
 Reinstatement  
 Trademark  
 Other

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 01 NOV -5 AM 10:11

RO/RA change

Examiner's Initials @

11.7.01

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : SITWANNEE AMERICAN CEMENT CO., INC.

2. The mailing address of the corporation : P.O. BOX 1829, LAKE CITY, FL 32056-1829

3. Date of incorporation/qualification: \_\_\_\_\_ Document number: P98000083936

4. The name and address of the current registered agent and office:

JOHN E. NORRIS  
201 N. MARION ST., STE.301  
LAKE CITY, FL 32055

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  
(P. O. Box Not Acceptable)

BRIAN P. SCHREIBER  
2 GUERDON RD., POST OFFICE BOX 1829  
LAKE CITY, FL 32055

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

X Doug Anderson  
(Signature of an officer, chairman or vice chairman of the board) \_\_\_\_\_ (Date)

DOUG ANDERSON, VICE PRESIDENT  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Brian P. Schreiber 10/03/01  
(Signature of Registered Agent) \_\_\_\_\_ (Date)

If signing on behalf of an entity:

BRIAN P. SCHREIBER  
(Typed or Printed Name) \_\_\_\_\_ (Capacity)

\*\*\* FILING FEE: \$35.00 \*\*\*

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
01 NOV -5 AM 10:11