## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000083936

Title:

Name:

Address:

City-St-Zip:

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FILED Apr 20, 2005 Secretary of State

Entity Name: SUWANNEE AMERICAN CEMENT CO., INC. **Current Principal Place of Business: New Principal Place of Business:** 2 GUERDON ROAD LAKE CITY, FL 32055 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 1829 LAKE CITY, FL 320561829 FEI Number: 59-3540547 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: SCHREIBER, BRIAN P SCHREIBER, BRIAN P 2 GUERDON RD 871 NW GUERDON STREET LAKE CITY, FL 32055 US LAKE CITY, FL 32055 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: 04/20/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition ANDERSON, JOE H JR. Name: Name: HWY. 349 NORTH Address: Address: City-St-Zip: OLD TOWN, FL 32680 City-St-Zip: ( ) Delete Title: **VPD** Title: () Change () Addition ANDERSON, DOUG Name: Name: HWY 349 NORTH Address: Address: OLD TOWN, FL 32680 City-St-Zip: City-St-Zip: Title: Title: VPD () Delete () Change () Addition ANDERSON, JOE H III Name: Name: HWY 349 NORTH Address: Address: City-St-Zip: OLD TOWN, FL 32680 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: BRIAN P SCHREIBER SD 04/20/2005

() Delete

( ) Change (X) Addition

SCHREIBER, BRIAN P.

LAKE CITY, FL 32055

871 NW GUERDON STREET