## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## Apr 30, 2004 8:00 am Secretary of State **DOCUMENT # P98000094247** 04-30-2004 90330 043 \*\*\*150.00 ENTERPRISE CONCRETE PUMPING, INC. Principal Place of Business Mailing Address 7740 ANDES DRIVE JACKSONVILLE FL 32244 US 7740 ANDES DRIVE JACKSONVILLE FL 32244 2. Principal Place of Business 3. Mailing Address 1952 Belhaven Dr. 1952 Belhaven CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 59-3542234 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent KRANTZ, LORI S - 21 Number is Not Acceptable) 7740 ANDES DRIVE JACKSONVILLE FL 32244 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change TITLE ☐ Delete Addition Krantz, Kenneth L 1952 Belhaven Dr. NAME KRANTZ, KENNETH L NAME STREET ADDRESS 7740 ANDES DRIVE STREET ADDRESS Orange Park, FL 32065 CITY-ST-ZIP JACKSONVILLE FL 32244 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Addition ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change □ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. Thereby certify 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 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 trusted 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.

Kenneth L Kruntz

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME

**FILED**