

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90065 045 ***150.00

0044812

DOCUMENT # P99000005091

1. Entity Name

PRECISION CONCRETE CONSTRUCTORS, INC.

Principal Place of Business

Mailing Address

915 DIPLOMAT DRIVE, SUITE 101F
 DEBARY FL 32713

915 DIPLOMAT DRIVE, SUITE 101F
 DEBARY FL 32713

920056



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3552718**

Applied For
 Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROEBUCK, DONALD
1690 OLD TITUSVILLE RD
DELTONA FL 32725

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
 NAME **D ROEBUCK, DONALD**
 STREET ADDRESS **915 DIPLOMAT DRIVE, SUITE 101F**
 CITY-ST-ZIP **DEBARY FL 32713**

Change Addition

TITLE Delete
 NAME **PD MORRIS, CHRISTOPHER D**
 STREET ADDRESS **1608 BAVON DR.**
 CITY-ST-ZIP **DELTONA FL 32725**

Change Addition

TITLE Delete
 NAME **STD PAGAND, ROSS**
 STREET ADDRESS **115 E. PANAMA RD.**
 CITY-ST-ZIP **WINTER SPRINGS FL 32708**

Change Addition

TITLE Delete

Change Addition

TITLE Delete

Change Addition

TITLE Delete

Change Addition

13. I hereby 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VICE-PRES.

02/07/01

Date

407-668-7805

Daytime Phone #

CR2E034 (10/00)