## **2005 FOR PROFIT CORPORATION ANNUAL REPORT**

SIGNATURE:

## FILED Apr 11, 2005 8:00 am Secretary of State

DOCUMENT # S18429  1. Entity Name DALE NEWELL CONCRETE, INC.			Common Co		04-11-2005 90155 002 ***150.00					
Principal Place of Business 21850 N RIVER RD ALVA, FL 33920		Mailing Address 21850 N RIVER RD ALVA, FL 33920								
2. Principal Place of Business		3. Mailing Address								
' Suite, Apt. #, etc.		Suite, Apt. #, etc.					BLOW DEBTS BYON	! BIBII BIBII BIBII	ICAL II IACI	
					03062005	Chg-P	CR2E03	34 (10/03)	*	
City & State	•	City & State			4. FEI Number Applied Fo 65-0232185 Not Applie			plied For t Applicable		
Zip Country		Zip Count			5. Certificate of Status Desired \$8.75 Additional Fee Required				litional	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
NEWELL	NEWELL, DALE O			Name						
21850 N RIVER RD			3	Street Address (P.O. Box Number is Not Acceptable)						
ALVA, FL 33920			Ī					-		
			(	City			FL	Zip Code		
	named entity submits this statement ions of registered agent.	for the purpose of changing its r	registered (	office or register	red agent, or bot	h, in the State of Fk	orida. I am f	amiliar with,	and accept	
SIGNATURE	Signature, typed or printed name of registered age	ot and title if applicable (NOTE-	· Registered An	gent signature require	d when reinstaling)	<del></del>	DATE		<u></u>	
	Cognition of the control of the cont									
FIL After M	E NOWil! FEE IS \$150.00 ay 1, 2005 Fee will be \$550	9. Election Campaig Trust Fund Contri	-		.00 May Be led to Fees					
10.		D DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF	ICERS AND			
TITLE	VPD NEWELL, DALE O	☐ Delete	TITLE NAME					☐ Change	Addition	
STREET ADDRESS	21850 N RIVER RD		STREET A							
CITY-ST-ZIP	ALVA, FL S	D odu	CITY-ST-	r-ZIP			· · · · · · · · · · · · · · · · · · ·	☐ Change	☐ Addition	
TITLE NAME	NEWELL, TODD	☐ Delete	TITLE NAME					☐ Change	☐ Addition	
STREET ADDRESS	21850 N. RIVER RD.			ADDRESS						
CITY-ST-ZIP	ALVA, FL 33920 PT-	- Delete	CITY-ST		<del> </del>			☐ Change	Addition	
NAME	NEWELL, JUDY K	- C Delete	NAME					- onengo		
STREET ADDRESS CITY-ST-ZIP	21850 N. RIVER RD. ALVA, FL 33920		STREET A	ADDRESS						
TITLE	V 33920	☐ Delete	TITLE	1-211		** **		☐ Change	☐ Addition	
NAME	NEWELL, DALE L		NAME						_	
STREET ADDRESS CITY-ST-ZIP	21850 N RIVER RD ALVA, FL 33920		STREET A	ADDRESS [-7 P						
TITLE	ALVA, 1 E 33320	☐ Delete	TITLE					☐ Change	Addition	
NAME			NAME							
STREET ADDRESS CITY-ST-ZIP			CITY-ST	ADDRESS r-zip						
TITLE		☐ Detete	TITLE					Change	Addition	
NAME CTOCCT ADDRESS			NAME	ADDDEEC						
STREET ADDRESS CITY-ST-ZIP			CITY-ST	ADDRESS T-ZIP						
12. I hereby indicated of the co-	certify that the information supplied will on this report or supplemental report poration or the receiver or trustee en , or on an attachment with an addres	rith this filing does not qualify for t is true and accurate and that m ipowered to execute this report s, with all other like empowered.	the exemp ny signatur as required	ption stated in S e shall have the d by Chapter 60	ection 119.07(3) same legal effec 7, Florida Statute	i), Florida Statutes. It as if made under is; and that my nam	I further cen oath; that I a ne appears in	tify that the in am an officer n Block 10 o	nformation or director or Block 11 if	