

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# S18429

FILED
Mar 17, 2007
Secretary of State**Entity Name:** DALE NEWELL CONCRETE, INC.**Current Principal Place of Business:**21850 N RIVER RD
ALVA, FL 33920**New Principal Place of Business:**16281 N OLEANDER
FT MYERS, FL 33908**Current Mailing Address:**21850 N RIVER RD
ALVA, FL 33920**New Mailing Address:**16281 N OLEANDER
FT MYERS, FL 33908**FEI Number:** 65-0232185**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NEWELL, DALE O
21850 N RIVER RD
ALVA, FL 33920 US**Name and Address of New Registered Agent:**NEWELL, DALE
16281 N OLEANDER
FT MYERS, FL 33908 US

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: DALE NEWELL

03/17/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: NEWELL, DALE O
Address: 21850 N RIVER RD
City-St-Zip: ALVA, FL

Title: S () Delete
Name: NEWELL, TODD
Address: 21850 N. RIVER RD.
City-St-Zip: ALVA, FL 33920

Title: PT () Delete
Name: NEWELL, JUDY K
Address: 21850 N. RIVER RD.
City-St-Zip: ALVA, FL 33920

Title: V () Delete
Name: NEWELL, DALE L
Address: 21850 N RIVER RD
City-St-Zip: ALVA, FL 33920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: NEWELL, DALE
Address: 16281 N OLEANDER
City-St-Zip: FT MYERS, FL 33908

Title: S (X) Change () Addition
Name: WEILER, CHRISTOPHER G
Address: P O BOX 152969
City-St-Zip: CAPE CORAL, FL 33915

Title: PT (X) Change () Addition
Name: NEWELL, SUE G
Address: 16281 N OLEANDER
City-St-Zip: FT MYERS, FL 33908

Title: V (X) Change () Addition
Name: NEWELL, DALE O
Address: 21850 N RIVER RD
City-St-Zip: ALVA, FL 33920

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

SIGNATURE: DALE NEWELL

VPD

03/17/2007

Electronic Signature of Signing Officer or Director

Date