## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 12, 2004 08:00 AM Secretary of State

ANNUAL REPURI						Secretary of State				
DOCUMENT # V24149  1. Entity Name FLORIDA CONCRETE RECYCLING, INC.						Secre	tary o	ı sta	te	
Principal Place of Business Mailing Address							-		_	
930 S.W. 3RD STREET 930 S.W. 3RD STREET GAINESVILLE, FL 32601 GAINESVILLE, FL 32601										
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc		Suite, Apt #, etc		04022004	Chg-P	CR2E034	·			
City & State		City & State		4. FEI Numb 59-311			Not	olled For Applicable		
Zip	Country	Zip	Count	ву		of Status Desired	Fee	3.75 Addi Required		
	8. Name and Address of Current	legistered Agent Name			7. Name and	Address of New R	egistered Age	mi		
RENFROE, TIMOTHY SCOTT				.10110						
7921 S.W.	122 STREET LLE, FL 32608	Street Address		P.O. Box Numb	er is Not Acceptable	}		-		
							1			
The above named entity submits this statement for the purpose of changing its registers			City	FL Zin Code						
the obligat	ions of registered agent.  Signature typed or printed name of registered agent	and bills if applicable (NOTE	É. Flegisterec	d Agent signawro ។១៤៤៧៦៖	i when reinstaing)		DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.	9. Election Campai Trust Fund Contr	ribution.		.00 May Be led to Fees		0- 1 -			
16.	OFFICERS AND	,	11,		ADDITIONS	CHANGES TO OFF	<del></del>			
ISTEE NAME	PD RENFROE, TIMOTHY S.	☐ Delete	- FIELE	3		מסספון		] Change	Addition	
STREET ADDRESS	7921 S.W. 122 STREET	•		ET ADDRESS	U00000109270 04/12/04-80036-020 15 <b>8.7</b> 5					
CHY-SI-ZIP	GAINESVILLE, FL	·	CHY	-ST-ZIP					QQ # 10	
TOLE		☐ Delete	1181.8	ş			Ε	Change	Addition	
NAME CIRLLI ADDRESS			NAA# STRE	L LT AUDRESS						
CHY-SI-ZIP				-S1-ZIP						
1815		☐ Detete	\$118.F	-			E	☐ Change	Addition	
NAME			NAM etar	ET ADIOHESS						
CITY+SI-ZIP			CHY	-SI-ZIP				7.0		
NAME		Delete	IIIII MAM	1			Ł	∃ Change	Addition	
STREET ADDRESS	Į.		E	ET ADDRESS						
CHY-SI-ZIP			CHY	-S1-282						
TITLE		☐ Delete	TISLE					☐ Change	Addition	
NAME STREET ADDRESS			NAM S188	LI ADDRESS						
City-S1-Zip				· 53 - 21P						
INCE		☐ Delete	1BF	:				] Change	Addition	
NAME			NAM	,						
STREET ADDRESS			1	ET ACORESS -ST-ZIP						
CHY-ST-ZIP	cartify that the information equalised with	h this filling does not guestio to			ection 119 07(3)	(i) Florida Statutes	Liurther certific	that the in	nformation	
indicated	certify that the information supplied with don this report or supplemental report is reportation or the receiver or trustee emp	s true and accurate and that report	my signa as requi	ture shall have the ired by Chapter 60	same legal effe 7. Florida Statut	ot as if made under es; and that my nam	oath, that I am a appears in E	an officer Block 10 or	or director Block 11 if	