2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

V24149 **DOCUMENT #**

1. Entity Name

FLORIDA CONCRETE RECYCLING, INC.



FILED Apr 02, 2003 8:00 am Secretary of State

04-02-2003 90392 035 ***158.75

Principal Place of Business 930 S.W. 3RD STREET GAINESVILLE FL 32601				Mailing Address 930 S.W. 3RD STREET GAINESVILLE FL 32601							
2. Principal P	Place of Busin	ess	3. Mail	. Mailing Address							
Suite, Apt.	#, etc.		Suite	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & Stat	е		City	City & State			4. FEI Number 59-3112783 Applied For Not Applicable				
Zip	Country Zip Co				Country	stry 55. Certificate of Status Desired 58.75 Additional Fee Required					
	6. Name	and Address of	d Agent			7. Name and	d Address of New	Registered A	gent		
RENFROE, TIMOTHY SCOTT 7921 S.W. 122 STREET GAINESVILLE FL 32608						Name Street Address (P.O. Box Number is Not Acceptable)					
					City	у			FL	Zip Code	е
8. The above the obligat			ement for the purp	ose of changing its	registered offi	ce or registere	ed agent, or bo	oth, in the State of I	Florida. I am fa	I miliar with,	and accept
A COUNTY	Signature, typed	or printed name of regis	tered agent and title if app	licable. (NOTE	: Registered Agent	signature required	when reinstating)		DAŢE		· {
Afte	r May 1, 200	FEE IS \$150 Fee will be \$ Florida Depar	550.00		,			lection Campaign I rust Fund Contribut	~		May Be I to Fees
10.		OFFICE	RS AND DIRECTO	RS	11.		ADDITIONS	/CHANGES TO O	FFICERS AND	DIRECTORS	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RENFROE, 7921 S.W. GAINESVIL	TIMOTHY S. 122 STREET LE FL		☐ Delete	TITLE NAME STREET ADDR					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			an again	☐ Delete	TITLE NAME STREET ADDR	1				☐ Change	☐ Addition
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TITLE NAME STREET ADDRESS (CITY-ST-ZIP				☐ Delete	TITLE NAME STREET ADDR	l l				Change	Addition
TITLE NAME Street Address City-St-Zip				Delete	TITLE NAME STREET ADDR					☐ Change	Addition

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TIMPENFROE 352.372.1237