

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 02, 2007 8:00 am**  
**Secretary of State**

05-02-2007 90046 031 \*\*\*150.00

**DOCUMENT # V53133**

1. Entity Name

LAYERS ASPHALT INC.



Principal Place of Business

504 AVOCADO CRL  
BRANDON FL 33510

Mailing Address

504 AVOCADO CRL  
BRANDON FL 33510



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E034 (10/06)

4. FEI Number **65-0341834**

☐ Applied For  
☐ Not Applicable

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

PURCELL, RONALD R ESQ.  
504 AVOCADO CRL  
BRANDON FL 33510

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete  
NAME PURCELL, RONALD R SR.  
STREET ADDRESS 504 AVOCADO CIRCLE  
CITY-STATE-ZIP BRANDON FL 33510

☐ Change ☐ Addition

TITLE **VP** ☒ Delete  
NAME PURCELL, CHRISTINE  
STREET ADDRESS 504 AVOCADO CIRCLE  
CITY-STATE-ZIP BRANDON FL 33510

TITLE **TIMOTHY C. SPIKER** ☐ Change ☒ Addition  
NAME 608 HIGHVIEW TERRACE N.  
STREET ADDRESS BRANDON, FL. 33510  
CITY-STATE-ZIP DIRECTOR

TITLE **D** ☒ Delete  
NAME BENNETT, MICHAEL  
STREET ADDRESS 1512 WHEELER RD  
CITY-STATE-ZIP SEFFNER FL 33584

TITLE **WILLIAM J. SHANK JR.** ☐ Change ☒ Addition  
NAME 504 AVOCADO CIRCLE  
STREET ADDRESS BRANDON, FL 33510  
CITY-STATE-ZIP DIRECTOR

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

*Ronald R. Purcell Sr.*

14. 25.07

813-778-4980

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #