

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 144218

**Entity Name:** FLORIDA ROCK INDUSTRIES, INC.

**Current Principal Place of Business:**

1200 URBAN CENTER DRIVE  
BIRMINGHAM, AL 35242

**Current Mailing Address:**

1200 URBAN CENTER DRIVE  
BIRMINGHAM, AL 35242

**FEI Number:** 59-0573002

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HILL, J T  
Address        155 E 21ST ST  
City-State-Zip: JACKSONVILLE FL 32206

Title            VPCT  
Name            SUAREZ, N  
Address        155 E 21ST ST  
City-State-Zip: JACKSONVILLE FL 32206

Title            CHAIRMAN  
Name            SHEPHERD, D R  
Address        1200 URBAN CENTER DRIVE  
City-State-Zip: BIRMINGHAM AL 35242

Title            TREASURER  
Name            BURTON, JR, C W  
Address        1200 URBAN CENTER DRIVE  
City-State-Zip: BIRMINGHAM AL 35242

Title            SECRETARY  
Name            PERKINS, JR, J F  
Address        1200 URBAN CENTER DRIVE  
City-State-Zip: BIRMINGHAM AL 35242

Title            ASST. TREASURER  
Name            HALCOMB, K T  
Address        1200 URBAN CENTER DRIVE  
City-State-Zip: BIRMINGHAM AL 35242

Title            VP  
Name            JAMES, D M  
Address        1200 URBAN CENTER DRIVE  
City-State-Zip: BIRMINGHAM AL 35242

Title            VP  
Name            SANSONE, D F  
Address        1200 URBAN CENTER DRIVE  
City-State-Zip: BIRMINGHAM AL 35242

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*I hereby 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 all other like empowered.*

**SIGNATURE:** J B WOODALL

**ASST. TREASURER**

**04/09/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title ASST. TREASURER  
Name WOODALL, J B  
Address 1200 URBAN CENTER DRIVE  
City-State-Zip: BIRMINGHAM AL 35242