

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H51584

**Entity Name:** LIMESTONE PRODUCTS, INC.

**Current Principal Place of Business:**

3107 NW COUNTY ROAD #235  
NEWBERY, FL 32669

**Current Mailing Address:**

P.O. BOX 1309  
MONROE, NC 28111 US

**FEI Number: 56-1465022**

**Certificate of Status Desired: No**

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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 DP  
Name CATES, ARTHUR K  
Address P.O. BOX 177  
City-State-Zip: NEWBERRY FL 32669

Title DVP  
Name BROOME, TOMMY L  
Address PO BOX 1309  
City-State-Zip: MONROE NC 28111

Title CFOA  
Name STOKEY, PAUL D  
Address PO BOX 1309  
City-State-Zip: MONROE NC 28111

*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: PAUL STOKEY**

**CFO**

**03/03/2023**

Electronic Signature of Signing Officer/Director Detail

Date