

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004848

FILED  
Mar 21, 2011  
Secretary of State

**Entity Name:** ZACHRY CONSTRUCTION CORPORATION

**Current Principal Place of Business:**

12625 WETMORE ROAD  
SUITE 301  
SAN ANTONIO, TX 78247

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 33240  
SAN ANTONIO, TX 78265

**New Mailing Address:**

FEI Number: 26-0868762

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PDC  
Name: ZACHRY, DAVID S  
Address: P.O. BOX 33240  
City-St-Zip: SAN ANTONIO, TX 78265

Title: VPD  
Name: ABIASSI, JEAN J  
Address: P.O. BOX 33240  
City-St-Zip: SAN ANTONIO, TX 78265

Title: CFOD  
Name: HARRAL, LEONARD R  
Address: P.O. BOX 33240  
City-St-Zip: SAN ANTONIO, TX 78265

Title: VPDT  
Name: STOKES, WARREN A  
Address: P.O. BOX 33240  
City-St-Zip: SAN ANTONIO, TX 78265

Title: VPD  
Name: WATT, TIMOTHY A  
Address: P.O. BOX 33240  
City-St-Zip: SAN ANTONIO, TX 78265

Title: S  
Name: WEBB, THOMAS C  
Address: P.O. BOX 33240  
City-St-Zip: SAN ANTONIO, TX 78265

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: WARREN A. STOKES

VPDT

03/21/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date