

2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 17, 2008
Secretary of State**

DOCUMENT# P01000090897

Entity Name: EAGLE CONCRETE SYSTEMS, INC.

Current Principal Place of Business:

3430 WILLARD ST
FORT MYERS, FL 33916

New Principal Place of Business:

12411 COMMERCE LAKES DRIVE
SUITE 100
FORT MYERS, FL 33916

Current Mailing Address:

PO BOX 60762
FORT MYERS, FL 33906

New Mailing Address:

FEI Number: 65-1139624 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEANNAH, MICHAEL J
14619 EAGLES LOOKOUT CT
FORT MYERS, FL 33912 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: LEANNAH, MICHAEL J
Address: 14619 EAGLES LOOKOUT CT
City-St-Zip: FORT MYERS, FL 33912

Title: DVT () Delete
Name: LEANNAH, CARMEL M
Address: 14619 EAGLES LOOKOUT CT
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL J. LEANNAH

PRES

03/17/2008

Electronic Signature of Signing Officer or Director

_____ Date