Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2012

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan; or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report;
- [ ] the final return/report;
- [ ] an amended return/report;
- [ ] a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
P & S PAVING, INC. 401(K) PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2003

2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)

P & S PAVING, INC.

3701 OLSON DRIVE
DAYTONA BEACH, FL 32124

2b Employer Identification Number (EIN)
59-3155035

2c Sponsor's telephone number
386-258-7911

2d Business code (see instructions)
237310

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/01/2013	IRIS BROWN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

Preparer's name (including firm name, if applicable) and address; include room or suite number. (optional)

Preparer's telephone number (optional)

3a Plan administrator's name and address [X] Same as Plan Sponsor Name [ ] Same as Plan Sponsor Address

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:

a Sponsor's name

4b EIN

4c PN

5	Total number of participants at the beginning of the plan year	**5**	119
6	Number of participants as of the end of the plan year (welfare plans complete only lines **6a, 6b, 6c,** and **6d**).		
a	Active participants	**6a**	130
b	Retired or separated participants receiving benefits	**6b**	3
c	Other retired or separated participants entitled to future benefits	**6c**	6
d	Subtotal. Add lines **6a**, **6b**, and **6c**	**6d**	139
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	**6e**	0
f	Total. Add lines **6d** and **6e**	**6f**	139
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	44
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2E 2K 3D 2G 2J 2F

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] ___ **A** (Insurance Information)
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [ ] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2012** **This Form is Open to Public Inspection.**

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A Name of plan
P & S PAVING, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
P & S PAVING, INC.

D Employer Identification Number (EIN)
59-3155035

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . ☐ Yes ☒ No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

NATIONWIDE

ONE NATIONWIDE PLAZA
COLUMBUS, OH 43215

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 64 99	TRUST RECORDKEEPER	10838	Yes [X] No [ ]	Yes [X] No [ ]	3932	Yes [ ] No [X]

(a) Enter name and EIN or address (see instructions)

SUNTRUST INVESTMENT SERVICES

303 PEACHTREE CENTER AVE. STE 140
ATLANTA, GA 30303

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 33 71	INVESTMENT ADVISOR	0	Yes [X] No [ ]	Yes [X] No [ ]	5308	Yes [ ] No [X]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes [ ] No [ ]	Yes [ ] No [ ]		Yes [ ] No [ ]

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

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Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2012

This Form is Open to Public Inspection

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A Name of plan
P & S PAVING, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
P & S PAVING, INC.

D Employer Identification Number (EIN)
59-3155035

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	829958	988124
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	829958	988124
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	829958	988124

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	57241	
(B) Participants	2a(1)(B)	100426	
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		157667
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		0
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		79938
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		237605
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	79439	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		79439
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		0
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		79439
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		158166
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [ ] Unqualified **(2)** [ ] Qualified **(3)** [X] Disclaimer **(4)** [ ] Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? [X] Yes [ ] No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: MARTIN,KLAYER & ASSOCIATES, PL **(2)** EIN: 82-0553529

d The opinion of an independent qualified public accountant is **not attached** because:

(1) [ ] This form is filed for a CCT, PSA, or MTIA. **(2)** [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e		X	
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
If "Yes," enter the amount of any plan assets that reverted to the employer this year ☐ **Yes** ☒ **No** **Amount:**

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

Part V Trust Information (optional)

6a Name of trust	**6b** Trust's EIN

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2012

This Form is Open to Public Inspection.

For calendar plan year 2012 or fiscal plan year beginning 01/01/2012 and ending 12/31/2012

A Name of plan
P & S PAVING, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
P & S PAVING, INC.

D Employer Identification Number (EIN)
59-3155035

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 31-1592130

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year. **3**

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a	The current year	**14a**	
b	The plan year immediately preceding the current plan year	**14b**	
c	The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a	The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b	The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a	Enter the number of employers who withdrew during the preceding plan year	**16a**	
b	If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

Plan Year Ending December 31, 2012
EIN 59-3155035
Plan Number 001

Financial Statements

P&S Paving, Inc.
401(k) Profit Sharing Plan

Year ended December 31, 2012
with Report of
Independent Certified Public Accountants

P&S Paving, Inc.
401(k) Profit Sharing Plan

Financial Statements

Year Ended December 31, 2012

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Martin, Klayer & Associates, PL
Certified Public Accountants & Business Advisors

Report of Independent Certified Public Accountants

The Administrative Committee of the
P & S Paving, Inc. 401(k) Profit Sharing Plan
Daytona Beach, Florida

Report on the Financial Statements
We were engaged to audit the accompanying financial statements of P & S Paving, Inc. 401(k) Profit Sharing Plan ("the Plan"), which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statements of changes in net assets available for benefits for the year ended December 31, 2012, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements
Plan management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility
Our responsibility is to express an opinion on these financial statements based on conducting our audits in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinions
As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Nationwide Financial Services, Inc., the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the year ended December 31, 2012, that the information provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion
Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient, appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Phone: **386-252-6075** • Fax: **386-252-6128**
1440 N. Nova Road, Suite 201 • Holly Hill, FL 32117

Report on Form and Content in Compliance With DOL Rules and Regulations
The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Martin, Klayer & Associates, PL

Daytona Beach, Florida
September 10, 2013

Financial Statements

P&S Paving, Inc.
401(k) Profit Sharing Plan

Statements of Net Assets Available for Benefits

December 31, 2012 and 2011

	2012	2011
Assets		
Investments, at fair market value:		
Cash and cash equivalents	$ -	$ -
Investments of interest in registered investments companies	**988,124**	829,958
Total investments	**988,124**	829,958
Receivables - employer contributions	**1,015**	1,150
Receivables - participant contributions	**1,831**	1,929
	2,846	3,079
Total Assets	**$ 990,970**	**$ 833,037**
Liabilities		
Total Liabilities	$ -	$ -
Net assets available for benefits	**$ 990,970**	$ 833,037

See accountants' report and notes to financial statements.

P&S Paving, Inc.
401(k) Profit Sharing Plan

Statement of Changes in Net Assets Available for Benefits

For the Year Ended December 31, 2012

	2012
Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	$ 79,938
Net investment income	79,938
Contributions:	
Employer	57,106
Participant	100,328
Total contributions	157,434
Total additions	237,372
Deductions from net assets attributed to:	
Benefits paid to participants	79,439
Total deductions	79,439
Net increase	157,933
Net assets available for benefits - Beginning of year	833,037
Net assets available for benefits - End of year	$ 990,970

See accountants' report and notes to financial statements.

P & S Paving, Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2012

1. Description of Plan

The following description of P & S Paving, Inc. 401(k) Profit Sharing Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering substantially all employees of the P & S Paving, Inc., (the Company) who have 90 days of service and are age 21 or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). An eligible employee who has satisfied the eligibility requirements will become a Participant in the Plan as of the date requirement is met.

Contributions

Each year, participants may contribute pretax annual compensation, as defined in the Plan, limited by the provisions of the Internal Revenue Code (IRC). Participants who have attained age 50 before the end of the Plan year are eligible to make "catch-up" contributions as allowed by the provisions of the IRC. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. Participants direct the investment of contributions into various investment options offered by the Plan. During the year ended December 31, 2012, the Company matched 100 percent of the first 4 percent of compensation that a participant contributed to the Plan. The matching Company contribution is vested directly into the investment option selected by the Participant. The Company may make annual discretionary matching contributions and/or profit sharing contributions to the Plan to the extent allowable by the IRC. The Company did not make an additional discretionary matching contribution or profit sharing contribution for the year ended December 31, 2012.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution and (b) Plan earnings (losses). Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

1. Description of Plan (continued)

Vesting

Participants are immediately fully vested in their contributions plus the actual earnings thereon. Effective as of January 1, 2011, the Plan elected to adopt the "safe harbor" rules regarding employer matching contributions. The election changes the employer matching contribution method from fifty percent of the first six percent of eligible compensation to one hundred percent of the first four percent of compensation. The Company amended and restated the Plan to include 401(k) Safe Harbor provisions.

Participant Loans

Participant loans are not permitted.

Payment of Benefits

On termination of service due to death or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or partial withdrawals or installments are permitted for required minimum distributions under Code Section 401(a)(9). In addition, hardship distributions may only be made from accounts which are fully vested.

Forfeited Accounts

At December 31, 2012, there were no forfeited nonvested accounts. The forfeited accounts can be used to reduce future employer contributions.

2. Summary of Significant Accounting Policies

Date of Management's Review

Subsequent events were evaluated through September 10, 2013, which is the date the financial statements were available to be issued.

Use of Estimates

The preparation of the financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosure. Accordingly, actual results could differ from those estimates.

2. Summary of Significant Accounting Policies (continued)

Basis of Accounting

The financial statements of the Plan are prepared on the accrual method of accounting.

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attributed for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

Investment Valuation and Income Recognition

Investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the plan's gains and losses on investments bought and sold as well as held during the year.

Payment of Benefits

Benefits are recorded when paid.

Operating Expenses

The Plan assesses against an individual Participant's account certain Plan expenses that are incurred by, or are attributable to, a particular Participant based on use of a particular Plan feature. All remaining expenses of maintaining the Plan are paid by the Company.

3. Fair Value Measurements

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits:

3. Fair Value Measurements (continued)

December 31, 2012	Fair Value Measurements Using: Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)
Investments of interest in registered investments companies – mutual funds	$ 988,124	$ 988,124
Total	$ 988,124	$ 988,124
December 31, 2011		
Investments of interest in registered investments companies – mutual funds	$ 829,958	$ 829,958
Total	$ 829,958	$ 829,958

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, Fair Value Measurements and Disclosures, provide the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurement) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

- *Level 1 Fair Value Measurements* – Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

3. Fair Value Measurements (continued)

- *Level 2 Fair Value Measurements* – Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or

  corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially for the full term of the asset or liability.

- *Level 3 Fair Value Measurements* – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

The Plan's investments are in mutual funds, which are valued using Level 1 inputs. These investments are valued at the closing price reported on the active market on which the individual securities are traded.

4. Information Prepared and Certified by the Custodian (unaudited)

Nationwide Trust Company, FSB, the custodian for the Plan, holds the Plan's investment assets and executes transactions therein. The following information as well as the information in the supplemental schedule of assets (held at end of year) was certified by the custodian as complete and accurate and, as directed by the Plan administrator, is unaudited. Such investments and other related information consists of the following at December 31:

	2012
Investments	$ 988,124
Net appreciation in fair value of investments	$ 79,938
Interest	$ –

5. Investments

The following presents investments that represent 5 percent or more of the Plan's net assets at December 31:

	2012
Nationwide Life Ins Company:	
NW INV DEST AGGRESSIVE	$ 203,716
NW INV DEST CONSERVATIVE	68,640
NW INV DEST MODERATE	108,046
OPPENHEIMER US GOVT	192,180
RDGWRTH SMCAP GR STK	69,646
FNKLNTMP FORGN	74,869
SNTNL GOVT SEC	53,950
RDGWRTH MDCAP VAL EQ	58,891
INVESCO SMCAP VAL A	57,080
	$ 887,018

6. Related Party Transactions

Certain investments are managed by Nationwide Financial Services, Inc. which is the parent of Nationwide Trust Company, FSB. Nationwide Trust Company, FSB is the custodian as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions.

Certain plan expenses, such as auditing and accounting, are paid by the Plan's participating employer. These payments are considered related party transactions since the plan received services from the plan sponsor and no accounting recognition is made. However, these transactions are not prohibited transactions under ERISA.

7. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants become 100 percent vested in their employer contributions.

8. Reconciliation of Financial Statements to Schedule H of Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements to Schedule H of Form 5500 at December 31:

	2012	2011
Net assets available for benefits per the financial statements	$ 990,970	$ 833,037
Less receivables:		
Employer contributions per the financial statements	(1,015)	(1,150)
Participant contributions per the financial statements	(1,831)	(1,929)
Net assets available for benefits per Schedule H to the Form 5500	$ 988,124	$ 829,958

The following is a reconciliation of the contributions per the financial statements for the year ended December 31, 2012, to the Form 5500:

Contributions:		
Employer per the financial statements	$ 57,106	
Participant per the financial statements	100,328	
Total contributions per the financial statements		$ 157,434
Additions:		
Receivables employer contributions, net	$ 135	
Receivables participant contributions, net	98	
Total receivables per the financial statements		$ 233
Total contributions per the Schedule H of Form 5500		$ 157,667

9. Tax Status

The Company adopted the Nationwide Financial Prototype Non-standardized Profit Sharing Plan with a cash or deferred arrangement. The prototype plan sponsor obtained a favorable opinion letter from the Internal Revenue Service dated May 20, 2005, which stated that the Plan is designed in accordance with applicable sections of the Internal Revenue Code (IRC). The Plan administrator has adopted all Plan provisions within the prototype document and believes that the

9. Tax Status (continued)

Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

10. Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

11. Subsequent Events

Effective January 1, 2013, the Company changed the Plan custodian to Retirement Solutions Specialist. Retirement Solutions Specialist liquidated the funds managed by Nationwide Financial Services, Inc. and transferred them to MassMutual Financial Group.

Other Financial Information

P&S Paving, Inc.
401(k) Profit Sharing Plan

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2012

(a)	(b) Identity of Issue	(c) Description of Issue	(d) Cost	(e) Current Value
*	Nationwide Life Ins Co	NW INV DEST AGGRESSIVE		$ 203,716
*	Nationwide Life Ins Co	NW INV DEST CONSERVATIVE		68,640
*	Nationwide Life Ins Co	NW INV DEST MODERATE		108,046
*	Nationwide Life Ins Co	FIDADV STKSEL MDCAP FUND		31,280
*	Nationwide Life Ins Co	NW MONEY MARKET FUND		25,607
*	Nationwide Life Ins Co	PUTNAM INVESTORS FUND		10,632
*	Nationwide Life Ins Co	OPP FLEX STRAT		16,539
*	Nationwide Life Ins Co	OPPENHEIMER US GOV'T		192,180
*	Nationwide Life Ins Co	RDGWRTH SMACAP GR STK		69,646
*	Nationwide Life Ins Co	RDGWRTH ST US TREASURE		3,870
*	Nationwide Life Ins Co	FNKLNTMP FORGN		74,869
*	Nationwide Life Ins Co	SNTNL GOVT SEC		53,950
*	Nationwide Life Ins Co	RDGWRTH MDCAP VAL EQ		58,891
*	Nationwide Life Ins Co	THRNBRG VAL I		108
*	Nationwide Life Ins Co	INVESCO SMCAP VAL A		57,080
*	Nationwide Life Ins Co	GDMNSCS SHRT DUR GOVT INST		-
*	Nationwide Life Ins Co	AMRDS CAP WLD GR INC		4,024
*	Nationwide Life Ins Co	DWS RREEF REAL ESTATE		9,046
				988,124

Note: Column (a) "*" indicates parties-in-interest.
Column (d) is blank as all investments are participant directed.

P&S Paving, Inc.
401(k) Profit Sharing Plan
EIN 59-3155035 Plan 001
Attachment to 2012 Form 5500

Plan Year Ending December 31, 2012
EIN 59-3155035
Plan Number 001

Financial Statements

P&S Paving, Inc.
401(k) Profit Sharing Plan

Year ended December 31, 2012
with Report of
Independent Certified Public Accountants

P&S Paving, Inc.
401(k) Profit Sharing Plan

Financial Statements

Year Ended December 31, 2012

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Martin, Klayer & Associates, PL
Certified Public Accountants & Business Advisors

Report of Independent Certified Public Accountants

The Administrative Committee of the
P & S Paving, Inc. 401(k) Profit Sharing Plan
Daytona Beach, Florida

Report on the Financial Statements
We were engaged to audit the accompanying financial statements of P & S Paving, Inc. 401(k) Profit Sharing Plan ("the Plan"), which comprise the statements of net assets available for benefits as of December 31, 2012 and 2011, and the related statements of changes in net assets available for benefits for the year ended December 31, 2012, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements
Plan management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility
Our responsibility is to express an opinion on these financial statements based on conducting our audits in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinions
As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Nationwide Financial Services, Inc., the trustee of the Plan, except for comparing the information with the related information included in the financial statements and supplemental schedules. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the year ended December 31, 2012, that the information provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion
Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient, appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

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1440 N. Nova Road, Suite 201 • Holly Hill, FL 32117

Report on Form and Content in Compliance With DOL Rules and Regulations
The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Martin, Klayer & Associates, PL

Daytona Beach, Florida
September 10, 2013

Financial Statements

P&S Paving, Inc.
401(k) Profit Sharing Plan

Statements of Net Assets Available for Benefits

December 31, 2012 and 2011

	2012	2011
Assets		
Investments, at fair market value:		
Cash and cash equivalents	$ -	$ -
Investments of interest in registered investments companies	**988,124**	829,958
Total investments	**988,124**	829,958
Receivables - employer contributions	**1,015**	1,150
Receivables - participant contributions	**1,831**	1,929
	2,846	3,079
Total Assets	**$ 990,970**	**$ 833,037**
Liabilities		
Total Liabilities	$ -	$ -
Net assets available for benefits	**$ 990,970**	$ 833,037

See accountants' report and notes to financial statements.

P&S Paving, Inc.
401(k) Profit Sharing Plan

Statement of Changes in Net Assets Available for Benefits

For the Year Ended December 31, 2012

	2012
Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	$ 79,938
Net investment income	79,938
Contributions:	
Employer	57,106
Participant	100,328
Total contributions	157,434
Total additions	237,372
Deductions from net assets attributed to:	
Benefits paid to participants	79,439
Total deductions	79,439
Net increase	157,933
Net assets available for benefits - Beginning of year	833,037
Net assets available for benefits - End of year	$ 990,970

See accountants' report and notes to financial statements.

P & S Paving, Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

December 31, 2012

1. Description of Plan

The following description of P & S Paving, Inc. 401(k) Profit Sharing Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering substantially all employees of the P & S Paving, Inc., (the Company) who have 90 days of service and are age 21 or older. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). An eligible employee who has satisfied the eligibility requirements will become a Participant in the Plan as of the date requirement is met.

Contributions

Each year, participants may contribute pretax annual compensation, as defined in the Plan, limited by the provisions of the Internal Revenue Code (IRC). Participants who have attained age 50 before the end of the Plan year are eligible to make "catch-up" contributions as allowed by the provisions of the IRC. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. Participants direct the investment of contributions into various investment options offered by the Plan. During the year ended December 31, 2012, the Company matched 100 percent of the first 4 percent of compensation that a participant contributed to the Plan. The matching Company contribution is vested directly into the investment option selected by the Participant. The Company may make annual discretionary matching contributions and/or profit sharing contributions to the Plan to the extent allowable by the IRC. The Company did not make an additional discretionary matching contribution or profit sharing contribution for the year ended December 31, 2012.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution and (b) Plan earnings (losses). Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

1. Description of Plan (continued)

Vesting

Participants are immediately fully vested in their contributions plus the actual earnings thereon. Effective as of January 1, 2011, the Plan elected to adopt the "safe harbor" rules regarding employer matching contributions. The election changes the employer matching contribution method from fifty percent of the first six percent of eligible compensation to one hundred percent of the first four percent of compensation. The Company amended and restated the Plan to include 401(k) Safe Harbor provisions.

Participant Loans

Participant loans are not permitted.

Payment of Benefits

On termination of service due to death or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or partial withdrawals or installments are permitted for required minimum distributions under Code Section 401(a)(9). In addition, hardship distributions may only be made from accounts which are fully vested.

Forfeited Accounts

At December 31, 2012, there were no forfeited nonvested accounts. The forfeited accounts can be used to reduce future employer contributions.

2. Summary of Significant Accounting Policies

Date of Management's Review

Subsequent events were evaluated through September 10, 2013, which is the date the financial statements were available to be issued.

Use of Estimates

The preparation of the financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosure. Accordingly, actual results could differ from those estimates.

2. Summary of Significant Accounting Policies (continued)

Basis of Accounting

The financial statements of the Plan are prepared on the accrual method of accounting.

Investment contracts held by a defined-contribution plan are required to be reported at fair value. However, contract value is the relevant measurement attributed for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the plan. The Statement of Changes in Net Assets Available for Benefits is prepared on a contract value basis.

Investment Valuation and Income Recognition

Investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the plan's gains and losses on investments bought and sold as well as held during the year.

Payment of Benefits

Benefits are recorded when paid.

Operating Expenses

The Plan assesses against an individual Participant's account certain Plan expenses that are incurred by, or are attributable to, a particular Participant based on use of a particular Plan feature. All remaining expenses of maintaining the Plan are paid by the Company.

3. Fair Value Measurements

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits:

3. Fair Value Measurements (continued)

December 31, 2012	Fair Value Measurements Using: Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)
Investments of interest in registered investments companies – mutual funds	$ 988,124	$ 988,124
Total	$ 988,124	$ 988,124
December 31, 2011		
Investments of interest in registered investments companies – mutual funds	$ 829,958	$ 829,958
Total	$ 829,958	$ 829,958

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, Fair Value Measurements and Disclosures, provide the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurement) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

- *Level 1 Fair Value Measurements* – Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

3. Fair Value Measurements (continued)

- *Level 2 Fair Value Measurements* – Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or

  corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially for the full term of the asset or liability.

- *Level 3 Fair Value Measurements* – Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

The Plan's investments are in mutual funds, which are valued using Level 1 inputs. These investments are valued at the closing price reported on the active market on which the individual securities are traded.

4. Information Prepared and Certified by the Custodian (unaudited)

Nationwide Trust Company, FSB, the custodian for the Plan, holds the Plan's investment assets and executes transactions therein. The following information as well as the information in the supplemental schedule of assets (held at end of year) was certified by the custodian as complete and accurate and, as directed by the Plan administrator, is unaudited. Such investments and other related information consists of the following at December 31:

	2012
Investments	$ 988,124
Net appreciation in fair value of investments	$ 79,938
Interest	$ –

5. Investments

The following presents investments that represent 5 percent or more of the Plan's net assets at December 31:

	2012
Nationwide Life Ins Company:	
NW INV DEST AGGRESSIVE	$ 203,716
NW INV DEST CONSERVATIVE	68,640
NW INV DEST MODERATE	108,046
OPPENHEIMER US GOVT	192,180
RDGWRTH SMCAP GR STK	69,646
FNKLNTMP FORGN	74,869
SNTNL GOVT SEC	53,950
RDGWRTH MDCAP VAL EQ	58,891
INVESCO SMCAP VAL A	57,080
	$ 887,018

6. Related Party Transactions

Certain investments are managed by Nationwide Financial Services, Inc. which is the parent of Nationwide Trust Company, FSB. Nationwide Trust Company, FSB is the custodian as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions.

Certain plan expenses, such as auditing and accounting, are paid by the Plan's participating employer. These payments are considered related party transactions since the plan received services from the plan sponsor and no accounting recognition is made. However, these transactions are not prohibited transactions under ERISA.

7. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants become 100 percent vested in their employer contributions.

8. Reconciliation of Financial Statements to Schedule H of Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements to Schedule H of Form 5500 at December 31:

	2012	2011
Net assets available for benefits per the financial statements	$ 990,970	$ 833,037
Less receivables:		
Employer contributions per the financial statements	(1,015)	(1,150)
Participant contributions per the financial statements	(1,831)	(1,929)
Net assets available for benefits per Schedule H to the Form 5500	$ 988,124	$ 829,958

The following is a reconciliation of the contributions per the financial statements for the year ended December 31, 2012, to the Form 5500:

Contributions:		
Employer per the financial statements	$ 57,106	
Participant per the financial statements	100,328	
Total contributions per the financial statements		$ 157,434
Additions:		
Receivables employer contributions, net	$ 135	
Receivables participant contributions, net	98	
Total receivables per the financial statements		$ 233
Total contributions per the Schedule H of Form 5500		$ 157,667

9. Tax Status

The Company adopted the Nationwide Financial Prototype Non-standardized Profit Sharing Plan with a cash or deferred arrangement. The prototype plan sponsor obtained a favorable opinion letter from the Internal Revenue Service dated May 20, 2005, which stated that the Plan is designed in accordance with applicable sections of the Internal Revenue Code (IRC). The Plan administrator has adopted all Plan provisions within the prototype document and believes that the

9. Tax Status (continued)

Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

10. Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

11. Subsequent Events

Effective January 1, 2013, the Company changed the Plan custodian to Retirement Solutions Specialist. Retirement Solutions Specialist liquidated the funds managed by Nationwide Financial Services, Inc. and transferred them to MassMutual Financial Group.

Other Financial Information

P&S Paving, Inc.
401(k) Profit Sharing Plan

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2012

(a)	(b) Identity of Issue	(c) Description of Issue	(d) Cost	(e) Current Value
*	Nationwide Life Ins Co	NW INV DEST AGGRESSIVE		$ 203,716
*	Nationwide Life Ins Co	NW INV DEST CONSERVATIVE		68,640
*	Nationwide Life Ins Co	NW INV DEST MODERATE		108,046
*	Nationwide Life Ins Co	FIDADV STKSEL MDCAP FUND		31,280
*	Nationwide Life Ins Co	NW MONEY MARKET FUND		25,607
*	Nationwide Life Ins Co	PUTNAM INVESTORS FUND		10,632
*	Nationwide Life Ins Co	OPP FLEX STRAT		16,539
*	Nationwide Life Ins Co	OPPENHEIMER US GOV'T		192,180
*	Nationwide Life Ins Co	RDGWRTH SMACAP GR STK		69,646
*	Nationwide Life Ins Co	RDGWRTH ST US TREASURE		3,870
*	Nationwide Life Ins Co	FNKLNTMP FORGN		74,869
*	Nationwide Life Ins Co	SNTNL GOVT SEC		53,950
*	Nationwide Life Ins Co	RDGWRTH MDCAP VAL EQ		58,891
*	Nationwide Life Ins Co	THRNBRG VAL I		108
*	Nationwide Life Ins Co	INVESCO SMCAP VAL A		57,080
*	Nationwide Life Ins Co	GDMNSCS SHRT DUR GOVT INST		-
*	Nationwide Life Ins Co	AMRDS CAP WLD GR INC		4,024
*	Nationwide Life Ins Co	DWS RREEF REAL ESTATE		9,046
				988,124

Note: Column (a) "*" indicates parties-in-interest.
Column (d) is blank as all investments are participant directed.

P&S Paving, Inc.
401(k) Profit Sharing Plan
EIN 59-3155035 Plan 001
Attachment to 2012 Form 5500

Attachment to 2012 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name P & S Paving, Inc. 401(k) Profit Sharing Plan **EIN:** 59-3155035
Plan Sponsor's Name P & S Paving, Inc. **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	NW Inv Dest Aggressive	Mutual Fund		203,716
	NW Inv Dest Conservative	Mutual Fund		68,640
	NW Inv Dest Moderate	Mutual Fund		108,046
	FidAdv StkSel MdCap Fund	Mutual Fund		31,280
	NW Money Market Fund	Mutual Fund		25,608
	Putnam Investors Fund	Mutual Fund		10,632
	Opp Flex Strat	Mutual Fund		16,539

Attachment to 2012 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name P & S Paving, Inc. 401(k) Profit Sharing Plan **EIN:** 59-3155035
Plan Sponsor's Name P & S Paving, Inc. **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	Oppenheimer US Gov't	Mutual Fund		192,180
	RdgWrth SmCap Gr Stk	Mutual Fund		69,646
	RdgWrth ST US Treas	Mutual Fund		3,870
	FnklnTmp Forgn	Mutual Fund		74,869
	Sntnl Govt Sec	Mutual Fund		53,950
	Rdgwrth MdCap Val Eq	Mutual Fund		58,891
	Thrnbrg Val I	Mutual Fund		108

Attachment to 2012 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name P & S Paving, Inc. 401(k) Profit Sharing Plan **EIN:** 59-3155035
Plan Sponsor's Name P & S Paving, Inc. **PN:** 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	Invesco SmCap Val A	Mutual Fund		57,080
	GdmnScs Shrt Dur Govt	Mutual Fund		0
	AmRds Cap Wld Gr Inc	Mutual Fund		4,024
	DWS RREEF Real Estate	Mutual Fund		9,046