2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#831096

Entity Name: MASONITE CORPORATION

FILED Mar 02, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
1 N. DALE #950 TAMPA, FL	MABRY			F air 1 acc or D air	
Current Mailing Address:			New Mailing Address:		
1 N. DALE MABRY #950 TAMPA, FL 33609					
FEI Number: 64-0198020 FEI Number Applied For () FEI Num			nber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
MACLSACE, STEVE 1 N DALE MABRY #950 TAMPA, FL 33609 US			MACISAAC, STEVE 1 N DALE MABRY #950 TAMPA, FL 33609 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: STEVE MACISAAC			03/02/2007		
	Electronic Signature of Registered A	gent			Date
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () Delete FREEMAN, KENNETH 1 N. DALE MABRY HWY #950 TAMPA, FL 33609	N: Ad	itle: lame: .ddress: city-St-Zip:	() Cha	ange ()Addition
Title: Name: Address: City-St-Zip:	VS () Delete ULSTER, HARLEY 1600 BRITANNIA RD. E MISSISSAUGA, ON, L4W 1J2	N: Ad	itle: lame: .ddress: city-St-Zip:	MURPHY, ROSE	ange()Addition MABRY HWY, #950
Title: Name: Address: City-St-Zip:	VPTD () Delete TUBBESING, ROBERT 1600 BRITANNIA RD. E MISSISSAUGA, ON, L4W 1J2	N: Ad	itle: lame: .ddress: city-St-Zip:	ARNOLD, FREDER	ange()Addition ICK MABRY HWY, #950
Title: Name: Address: City-St-Zip:	VD () Delete MACLSAAC, STEVE 1 N.DALE MABRY HWY,#950 TAMPA, FL 33609	N: A:	itle: lame: .ddress: city-St-Zip:	() Cha	ange () Addition
Title: Name: Address: City-St-Zip:	V () Delete BERNARDS, PAUL 1600 BRITANNIA RD. E MISSISSAUGA,ONTARIO L4W1J2, OC	N: Ad	itle: lame: .ddress: city-St-Zip:	LYNCH, FREDERIC	ange()Addition K MABRY HWY, #950
Title: Name: Address: City-St-Zip:	AS () Delete HEWLETT, TREVOR A 1 N.DALE MABRY HWY, #950 TAMPA, FL 33609	N: Ad	iitle: lame: .ddress: city-St-Zip:	() Cha	ange () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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: TREVOR HEWLETT AS 03/02/2007