

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 831096

FILED
Feb 24, 2009
Secretary of State

Entity Name: MASONITE CORPORATION

Current Principal Place of Business:

1 N. DALE MABRY
#950
TAMPA, FL 33609

New Principal Place of Business:

1 N. DALE MABRY HWY
#950
TAMPA, FL 33609

Current Mailing Address:

1 N. DALE MABRY
#950
TAMPA, FL 33609

New Mailing Address:

1 N. DALE MABRY HWY
#950
TAMPA, FL 33609

FEI Number: 64-0198020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACISAAC, STEVE
1 N DALE MABRY
#950
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

CLARK, MATTHEW
1 N DALE MABRY HWY
#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: MATTHEW M. CLARK

02/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LYNCH, FREDERICK J
Address: 1 N. DALE MABRY HWY.#950
City-St-Zip: TAMPA, FL 33609

Title: SE () Delete
Name: CLARK, MATTHEW M
Address: ONE NORTH DALE MABRY HWY, #950
City-St-Zip: TAMPA, FL 33609

Title: VPFN () Delete
Name: DILUCENTE, ANTHONY
Address: ONE NORTH DALE MABRY HWY, #950
City-St-Zip: TAMPA, FL 33609

Title: AS () Delete
Name: HEWLETT, TREVOR
Address: 1 N.DALE MABRY HWY,#950
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: TREVOR HEWLETT

AS

02/24/2009

Electronic Signature of Signing Officer or Director

Date