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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

CHAPMAN MASONRY, INCORPORATED (4)							 	<u> </u>		ĒJĒJ, DOBOJ BIĒJ	
inginal Flago	d Duningan		Mailing Address								
incipal Place o % LARRY L C 4840 BULLIS !	HAPMAN	**	% LARRY L CHAPMAN 4840 BULLIS RD	I							
ST CLOUD FL			ST CLOUD FL 34772				3. Date Inco	orporated or Qualified	3a. D	ate of Last Re	eport
							1 -	1/1989		04/19/199	95
Principal Plac	ce of Business	28	a. Mailing Address				4. FEI Num			—	Applied For
		26	I		 .		59-	2965958			Not Applicable
Suite, Apt. #	, etc.		Suite, Apt. ≠, etc.				5. Certificat	e of Status Desired			Additional Required
City & State		27	City & State				6 Election	Campaign Financing			May Be
Oity & State		28	n ´				1	nd Contribution			d to Fees
Zip	Country		Zip	Col	untry		B. This corp	poration has liability for	or intangible	tax under s	199.032,
	25	29		30]			Florida S		es No		
	9. Name and Address	of Current Regi	istered Agent		81 Nan		10. Name a	nd Address of New	r Hegistere	a Agent	
A.1.1.B.1.1											
	IN, LARRY L				82 Stre	et Addres	ss (P.O. Box N	umber is Not Accep	table)		
4840 BU	LLIS HU JD FL 34772				83						
31 0100	JD FL 34112									OF 7.	p Code
					B4 City				F	L	
 Pursuant to 	o the provisions of Sections ad agent, or both, in the St	s 607.0502 and 6	507.1508, Florida Statut	es, the ab	ove-namec	corpora	Lof directors L	hereby accept the a	pointment	as registered	l agent. I am
familiar with	n, and accept the obligation	ris of, Section bu	7,0505, Florida Statutes	j.		n s board					
familiar with	n, and accept the obligations and accept the obligations of responsibilities and accept the obligations of responsibilities and accept the obligations of responsibilities.	risi of, Section bu	if applicable (NC	one: Registere		n s board	when reinstating)		DATE		
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SIGNATURE:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-96

(407) 892-8382 Daytime Prione #

CR2E034 (12/95)