


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 11, 2006 8:00 am
Secretary of State

05-11-2006 90236 004 ***150.00

DOCUMENT # 406023			
1. Entity Name MCGEE MASONRY, INC.			
Principal Place of Business 850 NORTH 61ST AVENUE PENSACOLA FL 32506		Mailing Address 850 NORTH 61ST AVENUE PENSACOLA FL 32506	
2. Principal Place of Business 7037 Pro-AM Ct.		3. Mailing Address 7037 Pro-AM Ct.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Navarre, FL		City & State Navarre FL	
Zip 32566		Zip 32566	
Country Santa Rosa		Country Santa Rosa	
6. Name and Address of Current Registered Agent MCGEE, ROY H 850 NORTH 61ST AVENUE PENSACOLA FL 32506		7. Name and Address of New Registered Agent Name MCGEE ROY H. Street Address (P.O. Box Number is Not Acceptable) 7037 Pro-AM Ct. City Navarre FL Zip Code 32566	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00. After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MCGEE, ROY H 850 N. 61ST AVENUE PENSACOLA FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.D. MCGEE ROY H. 7037 Pro-AM Ct. Navarre FL 32566 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MCGEE ROY D 850 N. 61ST AVENUE PENSACOLA FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MCGEE ROY D 5749 EAST BAY Blvd. Gulf Breeze FL 32561 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MCGEE, RUBY 850 N. 61ST AVENUE PENSACOLA FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MCGEE RUBY 7037 Pro-AM Ct. Navarre FL 32566 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCGEE, RUBY 850 N. 61ST AVENUE PENSACOLA FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCGEE RUBY 7037 Pro-AM Ct. Navarre FL 32566 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: Roy H. McGee President		Date 5-8-06 Daytime Phone # 850-939-0622	



1st MOORE CR2E034 (10/05)

...40090547 ATTACHMENT #406023
Would you please waive the late
filing fee? The form was not
received until 5/5/06 due to
a move and address change.

Thank you very much,

Quincy McFee
McFee Masonry Inc.
7037 Pro-Am Ct.
Navarre, FL. 32566