

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 679557

FILED
Apr 28, 2009
Secretary of State

Entity Name: ALVIN SOMMERS MASONRY, INC.

Current Principal Place of Business:

2664 MAPLELOFT LANE
SARASOTA, FL 34232

New Principal Place of Business:

7150 RUSTIC ACRES DR
SARASOTA, FL 34241

Current Mailing Address:

2664 MAPLELOFT LANE
SARASOTA, FL 34232

New Mailing Address:

7150 RUSTIC ACRES DR
SARASOTA, FL 34241

FEI Number: 59-2005311

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOMMERS, ERMA
2664 MAPLE LOFT LN
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

SOMMERS, VERNON
7150 RUSTIC ACRES DR
SARASOTA, FL 34241 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: VERNON SOMMERS

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: SOMMERS, ERMA
Address: 2664 MAPLELOFT LANE
City-St-Zip: SARASOTA, FL 34232

Title: PD () Delete
Name: SOMMERS, VERNON
Address: 7150 RUSTIC ACRES DR.
City-St-Zip: SARASOTA, FL 34241

Title: VPD (X) Delete
Name: MILLER, DAVID
Address: 7005 OWLS NEST TERR., MAGNOLIA CROSSINGS
City-St-Zip: BRADENTON, FL 34203

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SOMMERS, VERNON
Address: 7150 RUSTIC ACRES DR
City-St-Zip: SARASOTA, FL 34241

Title: VPD (X) Change () Addition
Name: MILLER, DAVID
Address: 7005 OWLS NEST TERR
City-St-Zip: BRADENTON, FL 34203

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: VERNON SOMMERS

P

04/28/2009

Electronic Signature of Signing Officer or Director

Date