

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 853835

Entity Name: MASONRY ARTS, INC.

FILED
May 08, 2009
Secretary of State

Current Principal Place of Business:

2105 THIRD AVE N
BESSEMER, AL 350218350 US

New Principal Place of Business:

2105 THIRD AVE NORTH
BESSEMER, AL 350218350 US

Current Mailing Address:

2105 THIRD AVE N
P.O. BOX 1350
BESSEMER, AL 350218350 US

New Mailing Address:

2105 THIRD AVE N
P.O. BOX 1350
BESSEMER, AL 35020 US

FEI Number: 63-0779005

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SWINDAL, ROY
Address: 103 MOUNTAIN BROOK PARK DRIVE
City-St-Zip: BIRMINGHAM, AL 35213 US

Title: D () Delete
Name: WILLIAMS, THERESA N
Address: 906 4TH COURT
City-St-Zip: PLEASANT GROVE, AL 35127 US

Title: D () Delete
Name: SWINDAL, JOHN
Address: 1340 BRANCHWATER LANE
City-St-Zip: BIRMINGHAM, AL 35216 US

Title: D () Delete
Name: SWINDAL, VIRGINIA K
Address: 1340 BRANCHWATER LANE
City-St-Zip: BIRMINGHAM, AL 35216 US

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: THERESA N. WILLIAMS

D

05/08/2009

Electronic Signature of Signing Officer or Director

Date