1 of 2

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **F20170** **(9)**

1. Corporation Name

A.J. MASONRY & CEMENT, INC.

Principal Place of Business	Mailing Address
% ADAM J FRANZ 11349 CHAMBORD ST BROOKSVILLE FL 34613	% ADAM J FRANZ 11349 CHAMBORD ST BROOKSVILLE FL 34613

3. Date Incorporated or Qualified: 02/18/1981	3a. Date of Last Report: 05/01/1995
4. FEI Number: ~~59-2075822~~ 59-2075822	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

FRANZ, ADAM J
2100 SPRING LAKE HWY
BROOKSVILLE FL 34602

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when changing agent — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	FRANZ, ADAM J		1.2 NAME	
STREET ADDRESS	2100 SPRING LAKE HWY		1.3 STREET ADDRESS	
CITY-ST-ZIP	BROOKSVILLE FL		1.4 CITY-ST-ZIP	
TITLE	STD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	FRANZ, DONNA M		2.2 NAME	
STREET ADDRESS	2100 SPRING LAKE HWY		2.3 STREET ADDRESS	
CITY-ST-ZIP	BROOKSVILLE FL		2.4 CITY-ST-ZIP	
TITLE	V	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	FRANZ, SHAWN		3.2 NAME	
STREET ADDRESS	9661 LANGON ST		3.3 STREET ADDRESS	
CITY-ST-ZIP	SPRING HILL FL		3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Donna M. Franz S/T
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-96
Date

352-597-1948
Daytime Phone #

4-10-96

2062

ERROR IN FEIN # NEVER NOTICED
ON PRIOR YEARS' REPORTS.
Please correct your RECORDS
Thank You

MINDERS

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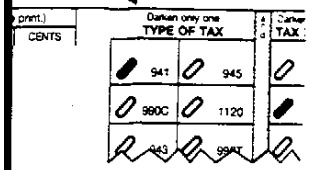

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0 5 1 1 0 2 0 0 9 3

Amount

Check Number

Date

Type of Tax

Tax Period

Mark the "X" in this box only if there is a change to Employer Identification Number (EIN) or Name.

See instructions on page 1.

EIN 59-2075822 140200

BANK NAME/
DATE STAMP

A J MASONRY & CEMENT INC
13349 CHAMBORD
BROOKSVILLE FL 34613-6813

941	945	1st Quar
990C	1120	2nd Quar
943	990T	3rd Quar
720	990PF	4th Quar
CT-1	1042	
940		

62

18 5

Telephone number ( )

FOR BANK USE IN MICR ENCODING

Federal Tax Deposit Coupon
Form 8109 (Rev. 01-94)