


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2004 08:00 AM
Secretary of State

DOCUMENT # H55007
1. Entity Name
WEST ORANGE MASONRY, INC.



Principal Place of Business
12303 S HANCOCK ROAD
CLERMONT, FL 34711 US

Mailing Address
P O BOX 770692
P.O. BOX 770692
WINTER GARDEN, FL 34777-0692 US



DO NOT WRITE IN THIS SPACE

01312004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2529582 Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
LONG, ESTHER R.
12303 S. HANCOCK RD.
CLERMONT, FL 34711

DO NOT WRITE IN THIS SPACE

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: *Esther R Long* *Esther Long* *Feb 2, 2004*
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LONG, DALTON B. 12303 S HANCOCK RD CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST LONG, ESTHER R. 12303 S HANCOCK RD CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000033733
02/05/04-80054-020 158.75

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Esther R Long* *Esther Long* VST *Feb 2, 2004* (407) 656-3446
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #