2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 26, 2008
Secretary of State

DOCUMENT# H74762

Entity Name: NICHOLS MASONRY, INC.

Current Principal Place of Business:

720 PONCE DELEON BLVD.
BROOKSVILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

720 PONCE DELEON BLVD.
BROOKSVILLE, FL 34601

New Mailing Address:

FEI Number: 59-2607317 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NICHOLS, CHERYL
720 PONCE DELEON BLVD.
BROOKSVILLE, FL 34601 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: PVP ( ) Delete
Name: NICHOLS, CHERYL
Address: 1014 WHITEWAY DR
City-St-Zip: BROOKSVILLE, FL 34601

Title: ST ( ) Delete
Name: NICHOLS, GARY
Address: 1014 WHITEWAY DRIVE
City-St-Zip: BROOKSVILLE, FL 34601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CHERYL NICHOLS PRES 08/26/2008

Electronic Signature of Signing Officer or Director Date