


2007 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 02, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # J11156</b> 1. Entity Name H & H MASONRY INC.	
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Principal Place of Business 4701 LONE PINE CT FT MYERS, FL 33905 US	Mailing Address 4701 LONE PINE CT FT MYERS, FL 33905 US
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**DO NOT WRITE IN THIS SPACE**



03062007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0016056	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent

HENDRIX, EDGAR PHILIP  
4701 LONE PINE CT  
FT. MYERS, FL 33905

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reissuing) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HENDRIX, RICHARD E. 13231 IDYLWILD FARM ROAD FT. MYERS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HENDRIX, EDGAR PHILIP 4701 LONE PINE CT FT. MYERS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HENDRIX, DONNA 4701 LONE PINE CT FT MYERS, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

U00000666172  
04/09/07-80035-014 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** Donna Hendrix DONNA HENDRIX 3/30/07 239-694-1460  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #