FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

and the section of the section of the



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

RUSTY'S MASONRY, INC.

FILED	
Jan 30 1998 8:00ar	n
Secretary of State	,

Principal Place	of Business	Mailing Address					
7295 W. MATAC	:/O RUSSELL U. SNEDEKER. JR. 295 W. MATADOR LANE IOMOSASSA FL 34446 IS) Russell U. Snedeker, Jr. 5 W. Matador Lane Mosassa Fl. 3444 6		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/05/1986		SPACE
2. Principal Place	ce of Business	2a. Mailing Addr	ess			4. FEI Number 59-2681534	Applied For Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #,	etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Count 30	ry		This corporation owes or has paid the cu Personal Property Tax due June 30.	rrent year Intangible X Yes No
	9. Name and Address of Cui	rrent Registered Agent				10. Name and Address of New Registered	Agent
SNEDEKER, RUSSELL U. JR. 7295 W. MATADOR LANE HOMOSASSA FL 34446		8	1	Name			
			82		2 Street Address (P.O. Box Number is Not Acceptable)		
			8	3			
			В	4	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, typed or privated risking or registered agent and title in appli			required when reinstalling) DATE
12.	OFFICERS AND DIRECTOR		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CPD	DEL e te	1.1 TITLE	☐ Change ☐ Addition
NAME	\$NEDEKER, RUSSELL U., JR		1.2 NAME	
STREET ADDRESS	7295 W MATADOR LANE		1.3 STREET ADDRESS	
CITY-ST-ZIP	HOMOSASSA FL		1.4 CITY-ST-ZIP	
TITLE	STD	DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	SNEDEKER, LINDA		2.2 NAME	
STREET ADDRESS	7295 W MATADOR LANE		2.3 STREET ADDRESS	
CITY-ST-ZIP	HOMOSASSA FL		2. 4 CITY - ST - ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			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	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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.

Russell U Snedeker

352/628-5651