

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J73581

FILED  
Apr 24, 2011  
Secretary of State

**Entity Name:** TIM GALLOWAY MASONRY, INC.

**Current Principal Place of Business:**

16277 E. DURAN BLVD.  
LOX., FL 33470 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 3644  
LANTANA, FL 33465 US

**New Mailing Address:**

**FEI Number:** 59-2802300

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GALLOWAY, TIMOTHY  
16277 E. DURAN BLVD.  
LOX, FL 33470 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

**OFFICERS AND DIRECTORS:**

Title: S  
Name: GALLOWAY, CONNIE  
Address: 16277 E. DURAN BLVD.  
City-St-Zip: LOX., FL 33470

Title: P  
Name: GALLOWAY, TIM  
Address: 16277 E. DURAN BLVD.  
City-St-Zip: LOX., FL 33470

I hereby 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 all other like empowered.

SIGNATURE: TIM GALLOWAY

P

04/24/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date