

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K01169

FILED  
Feb 19, 2010  
Secretary of State

Entity Name: OLD STYLE MASONRY, INC.

**Current Principal Place of Business:**

12207 LANE PARK RD  
TAVARES, FL 32778 US

**New Principal Place of Business:**

**Current Mailing Address:**

12207 LANE PARK RD  
TAVARES, FL 32778 US

**New Mailing Address:**

FEI Number: 59-2855220

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

KONESKI, RAYMOND  
12207 LANE PARK RD  
TAVARES, FL 32778 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MAYER, JOSEPH  
Address: 2459 WALKERTOWN AVE  
City-St-Zip: DELTONA, FL 32725 US

Title: SD  
Name: KONESKI, MARY  
Address: 12207 LANE PARK RD  
City-St-Zip: TAVARES, FL 32778

Title: D  
Name: KONESKI, RAYMOND  
Address: 12207 LANE PARK RD  
City-St-Zip: TAVARES, FL 32778

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: RAYMOND KONESKI

P

02/19/2010

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

\_\_\_\_\_  
Date