

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K84256

FILED
Apr 29, 2011
Secretary of State

Entity Name: MASTERS MASONRY OF ST. AUGUSTINE, INC.

Current Principal Place of Business:

% TIMOTHY J. MASTERS
P. O. BOX 3805
ST. AUGUSTINE, FL 320850805

New Principal Place of Business:

% TIMOTHY J. MASTERS
47 DOLPHIN DRIVE
ST. AUGUSTINE, FL 32084

Current Mailing Address:

% TIMOTHY J. MASTERS
P. O. BOX 3805
ST. AUGUSTINE, FL 320850805

New Mailing Address:

% TIMOTHY J. MASTERS
47 DOLPHIN DRIVE
ST. AUGUSTINE, FL 32084

FEI Number: 59-2952032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASTERS, TIMOTHY J
47 DOLPHIN DRIVE
SAINT AUGUSTINE, FL 32084 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: DP
Name: MASTERS, TIMOTHY J
Address: 47 DOLPHIN DRIVE
City-St-Zip: ST. AUGUSTINE, FL

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: TIMOTHY J MASTERS

DP

04/29/2011

Electronic Signature of Signing Officer or Director

Date