

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M74394

Entity Name: R & R MASONRY, INC.

FILED  
Apr 30, 2005  
Secretary of State

**Current Principal Place of Business:**

P.O. BOX 3125  
BRANDON, FL 33509

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3125  
BRANDON, FL 33509

**New Mailing Address:**

FEI Number: 59-2877748

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GRIFFIN, RAY  
917 EDGEHILL ROAD  
VALRICO, FL 33594 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: PRES ( ) Delete  
Name: RAFIELD, ROY L PRESIDE  
Address: 110 W. WHEELER RD.  
City-St-Zip: SEFFNER, FL 33584 US

Title: VP ( ) Delete  
Name: GRIFFIN, RAY VP  
Address: 917 EDGEHILL RD.  
City-St-Zip: VALRICO, FL 33594 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RAY GRIFFIN

VP

04/30/2005

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

\_\_\_\_\_  
Date