

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31456

FILED
Jul 07, 2006
Secretary of State

Entity Name: MASONRY CONTRACTORS ASSOCIATION OF FLORIDA - TAMPA BAY CHAPTER, INC.

Current Principal Place of Business:

2501-C NO. ORIENT RD., STE. C
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

2501-C NO. ORIENT RD., STE. C
TAMPA, FL 33619

New Mailing Address:

FEI Number: 59-2977034 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MORRELL, RHODA
2501-C NO. ORIENT RD.
SUITE C
TAMPA, FL 33619 US

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: PD () Delete
Name: BROOKSHIRE, DEVON
Address: 11700 58TH ST. NO., SUITE D
City-St-Zip: TAMPA, FL 33617

Title: VD () Delete
Name: FLYNN, FLOYD
Address: 18125 HWY 41 NO., CRYSTAL LAKE PLAZA #205A
City-St-Zip: LUTZRWATER, FL 33549

Title: STD () Delete
Name: MORRELL, RHODA
Address: 2501-C. NO. ORIENT RD.
City-St-Zip: TAMPA, FL 33619

Title: D () Delete
Name: LOVING, STEVE
Address: 2501-C NO. ORIENT RD.
City-St-Zip: TAMPA, FL 33619

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RHODA MORRELL

STD

07/07/2006

Electronic Signature of Signing Officer or Director

Date