

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004749

FILED
Jan 18, 2012
Secretary of State

Entity Name: PHOENIXMASONRY, INC.

Current Principal Place of Business:

504 PLANTATION DR.
HAVANA, FL 32333

New Principal Place of Business:

947 WEST FOLSOM AVENUE
SALT LAKE CITY, UT 84104

Current Mailing Address:

P.O. BOX 854
HAVANA, FL 32333

New Mailing Address:

1218 SANDRA CIRCLE
MURRY, UT 84121

FEI Number: 59-3594071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LETTIELIER, DAVID J
504 PLANTATION DR.
HAVANA, FL 32333 US

Name and Address of New Registered Agent:

LETTIELIER, DAVID J
504 PLANTATION DRIVE
HAVANA, FL 32333 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:

01/18/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: LETTELIER, DAVID J
Address: 504 PLANTATION DR.
City-St-Zip: HAVANA, FL 32333

Title: VD
Name: MILLIKEN, FREDERIC L
Address: 7505 CARIBBEAN DRIVE
City-St-Zip: ROWLETT, TX 75088

Title: SD
Name: KARPOS, VICTORIA
Address: 1218 SANDRA CIRCLE
City-St-Zip: MURRY, UT 84121

Title: PD
Name: KARPOS, VASIL
Address: 1218 SANDRA CIRCLE
City-St-Zip: MURRY, UT 84121

Title: D
Name: KARPOS, KOSTA
Address: 1218 SANDRA CIRCLE
City-St-Zip: MURRY, UT 84121

Title: D
Name: ELAINE, BELL
Address: 1014 EAST 200 SOUTH
City-St-Zip: SALT LAKE CITY, UT 84102

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

SIGNATURE: DAVID J. LETTELIER

D

01/18/2012

Electronic Signature of Signing Officer or Director

Date