2006 FOR PROFIT CORPORATION

NAME STRECT ADDRESS CITY-57-21P

FILED Apr 18, 2006 08:00 AM

ANNUAL KEPUKI			Secretary of State			
DOCUMENT # P00000021326 1. Entity Name MASON & WILLIAMS ASSOC., INC.					y ~.	
Principal Place of Business 16 PINEWOOD CIRCLE SAFETY HARBOR, FL 34695	Mailing Address 16 PINEWOOD CIRCLE SAFETY HARBOR, FL 34695			331 103 103 660 660	CESSE (1888) SERE 3310	1848 AUSTRAL II 1888
DO NOT WRITE IN THIS SPA		CE	04052006 4. FEI Number 59-3644 5. Certificate c	No Chg-P	CR2E034 (11.	Applied For Not Applicable Additional
6. Name and Address of Current Registered Agent WILLIAMS, DAVID L 16 PINEWOOD CIRCLE SAFETY HARBOR, FL 34695			IN T	NOT W HIS SP	ACE	
The above named entity submits this statement for the abitigations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and the statement of the statement agent and the statement agent agent and the statement agent agent agent and the statement agent	·	ed office or register		n, in the State of Flo	rida,) am famillar	with, and accept
FILE NOW!!! FEE 1\$ \$150.00 After May 1, 2006 Fee will be \$550.00	Election Campaign Fina		.00 May Be led to Fees			
10. OFFICERS AND D ITILE DO NAME WILLIAMS, DAVID L STREET ADDRESS 16 PINEWOOD CIRCLE CITY-SI-ZIP SAFETY HARBOR, FL 34695	RECTORS {				1000516943 106-80025	3 -001 150.1
Title Name Street address City-St-Zip					,	
TITLE HAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS GITY-ST-ZIP			DO NOT WRITE IN THIS SPACE			
INTLE NAME STREET ADDRESS GITY-ST-ZIP						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the teceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other fixe empowered.

SIGNATURE: This is the property of the property

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR