

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000034154

FILED
Jan 26, 2006
Secretary of State

Entity Name: EAST - WEST MASONRY CONTRACTORS, INC.

Current Principal Place of Business:

2981 10TH STREET
ORLANDO, FL 32820

New Principal Place of Business:

11621 NELLIE OAKS BEND
CLERMONT, FL 34711

Current Mailing Address:

2981 10TH STREET
ORLANDO, FL 32820

New Mailing Address:

PO BOX 121687
CLERMONT, FL 34711

FEI Number: 59-3636502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JORDAN II, EDWARD P P.A.
1460 E. HIGHWAY 50
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

BOYETTE, WADE JD
1635 EAST HIGHWAY 50
SUITE 300
CLERMONT, FL 34711 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: WADE BOYETTE, J.D, LL.M

01/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: WALKER, ROYCE
Address: 2981 10TH STREET
City-St-Zip: ORLANDO, FL 32820

Title: V/D () Delete
Name: LYNN, NANCY A
Address: 11621 NELLIE OAKS BLVD
City-St-Zip: CLERMONT, FL 34711

Title: S/D (X) Delete
Name: HERNDON, BRIAN
Address: 11621 NELLIE OAKS BLVD
City-St-Zip: CLERMONT, FL 34711

Title: T/D (X) Delete
Name: STINCHCOMB, ANTHONY
Address: 2981 10TH STREET
City-St-Zip: ORLANDO, FL 32820

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LYNN, NANCY A
Address: 11621 NELLIE OAKS BEND
City-St-Zip: CLERMONT, FL 34711

Title: V/P (X) Change () Addition
Name: HERNDON, BRIAN
Address: 11621 NELLIE OAKS BEND
City-St-Zip: CLERMONT, FL 34711

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

SIGNATURE: NANCY A LYNN

PRES

01/26/2006

Electronic Signature of Signing Officer or Director

Date