

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000044238

Entity Name: LISTON MASONRY, INC.

FILED
Jul 26, 2007
Secretary of State

Current Principal Place of Business:

11731 N.E. 188TH COURT
LAKE BUTLER, FL 32054

New Principal Place of Business:

Current Mailing Address:

11731 N.E. 188TH COURT
LAKE BUTLER, FL 32054

New Mailing Address:

FEI Number: 59-3639561

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LISTON, ROGER DAVID
11731 N.E. 188TH COURT
LAKE BUTLER, FL 32054 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LISTON, DAVID
Address: 11731 N.E. 188TH COURT
City-St-Zip: LAKE BUTLER, FL

Title: DVP () Delete
Name: NETTLES, MIKE
Address: 141 S.E. OTTINGER COURT
City-St-Zip: LAKE CITY, FL 32025

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 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: ROGER DAVID LISTON

PD

07/26/2007

Electronic Signature of Signing Officer or Director

Date