2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000106006

Address:

City-St-Zip:

4007 BALDWIN DR.

SEBASTIAN, FL 32958

FILED Jan 06, 2009 Secretary of State

Entity Nai	me: DAVID	PARSONS MASONRY, INC.			
Current Principal Place of Business:			New Principal	Place of Business:	
4007 BALE SEBASTIA	DWIN DR. AN, FL 3295	8			
Current Mailing Address:			New Mailing A	New Mailing Address:	
4007 BALE SEBASTIA	DWIN DR. AN, FL 3295	8			
FEI Number	: 59-2635289	FEI Number Applied For()	FEI Number Not Applicable	() Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Add	Name and Address of New Registered Agent:	
PARSONS, DAVID C 4007 BALDWIN DR. SEBASTIAN, FL 32958 US			813 DELTONA I BOX 1358413	ALL FLORIDA FIRM INC 813 DELTONA BLVD STE A BOX 1358413 DELTONA, FL 32725 US	
	named enti e of Florida.	ty submits this statement for the	purpose of changing its reg	gistered office or registered agent, or both,	
SIGNATURE: DEVIN NEWMAN FOR DAVID C PARSON			SON	01/06/2009	
Election Car		ronic Signature of Registered Actions ().	gent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD PARSONS, I 4007 BALD\ SEBASTIAN	VIN DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VSD PARSONS, (4007 BALD\ SEBASTIAN	VIN DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	TD PARSONS.	() Delete CURT J	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: PARSONS, DAVID C P 01/06/2009