

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000033493

FILED  
Oct 10, 2006  
Secretary of State

Entity Name: WALTER BRITT MASONRY, INC.

## Current Principal Place of Business:

10008 N. 52ND STREET  
TAMPA, FL 33617

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 16278  
TAMPA, FL 33617

## New Mailing Address:

FEI Number: 59-3707600

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRITT, BARBARA C  
10008 N. 52ND STREET  
TAMPA, FL 33617 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: BARBARA BRITT

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: BRITT, WALTER  
Address: 10008 N. 52ND STREET  
City-St-Zip: TAMPA, FL 33617

Title: VD ( ) Delete  
Name: BRITT, JANNETTE  
Address: 10008 N. 52ND STREET  
City-St-Zip: TAMPA, FL 33617

Title: STD ( ) Delete  
Name: BRITT, BARBARA C  
Address: 10008 N. 52ND STREET  
City-St-Zip: TAMPA, FL 33617

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: BRITT, MICHAEL  
Address: 10008 N. 52ND STREET  
City-St-Zip: TAMPA, FL 33617

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TR ( ) Change (X) Addition  
Name: BRITT, THOMAS  
Address: 10008 N 52 STREET  
City-St-Zip: TAMPA, FL 33617

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: BARBARA BRITT

STD

10/10/2006

Electronic Signature of Signing Officer or Director

Date