

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000034534

Entity Name: CAIN, MASON & COMPANY, INC

FILED  
Apr 18, 2007  
Secretary of State

## Current Principal Place of Business:

606 SW 36TH ST  
PALM CITY, FL 34990

## New Principal Place of Business:

## Current Mailing Address:

3410 NOBLE AVE  
PALM CITY, FL 34990

## New Mailing Address:

FEI Number: 65-1086885

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAIN, MATTIE F PRES  
3410 NOBLE AVE  
PALM CITY, FL 34990 US

## Name and Address of New Registered Agent:

CAIN, MATTIE F D  
3410 NOBLE AVE  
PALM CITY, FL 34990 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: MATTIE F CAIN

04/18/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CAIN, MATTIE F  
Address: 3410 NOBLE AVE  
City-St-Zip: PALM CITY, FL 34990

Title: D ( ) Delete  
Name: CAIN, ROY A  
Address: 3410 NOBLE AVE  
City-St-Zip: PALM CITY, FL 34990

Title: D ( ) Delete  
Name: MASON, DAVID  
Address: 2828 SE NORMAND ST  
City-St-Zip: STUART, FL 34997

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DP (X) Change ( ) Addition  
Name: CAIN, ROY A  
Address: 3410 NOBLE AVE  
City-St-Zip: PALM CITY, FL 34990

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: ROY A CAIN

P

04/18/2007

Electronic Signature of Signing Officer or Director

Date