

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000093045

FILED
Apr 19, 2004
Secretary of State

Entity Name: MASONRY CONTRACTORS OF FLORIDA, INC.

Current Principal Place of Business:

450 ST FRANCIS STREET
2ND FLOOR
TALLAHASSEE, FL 32301

New Principal Place of Business:

109 W. FOURTH AVENUE
TALLAHASSEE, FL 32303

Current Mailing Address:

450 ST FRANCIS STREET
2ND FLOOR
TALLAHASSEE, FL 32301

New Mailing Address:

109 W. FOURTH AVENUE
TALLAHASSEE, FL 32303

FEI Number: 59-3754239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLASTER, L M
200 W MIRACLE STRIP PARKWAY, SUITE 602
FT WALTON BEACH, FL 32548 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PLASTER, L M
Address: 200 W MIRACLE STRIP PARKWAY, SUITE 602
City-St-Zip: FT WALTON BEACH, FL 32548

Title: D () Delete
Name: PLASTER, JO ANN
Address: 200 W MIRACLE STRIP PARKWAY, SUITE 602
City-St-Zip: FT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: PLASTER, JO ANN
Address: 200 W MIRACLE STRIP PARKWAY, SUITE 602
City-St-Zip: FT WALTON BEACH, FL 32548

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JO ANN PLASTER

S/T

04/19/2004

Electronic Signature of Signing Officer or Director

Date