

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000093045

FILED  
Apr 12, 2005  
Secretary of State

Entity Name: MASONRY CONTRACTORS OF FLORIDA, INC.

## Current Principal Place of Business:

109 W. FOURTH AVENUE  
TALLAHASSEE, FL 32303

## New Principal Place of Business:

## Current Mailing Address:

109 W. FOURTH AVENUE  
TALLAHASSEE, FL 32303

## New Mailing Address:

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:

PLASTER, MICHAEL  
109 W. FOURTH AVENUE  
TALLAHASSEE, FL 32303 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: L M PLASTER

04/12/2005

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: D (X) Change ( ) Addition  
Name: PLASTER, L M  
Address: 109 W. FOURTH AVENUE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: D (X) Change ( ) Addition  
Name: PLASTER, JO A  
Address: 109 W. FOURTH AVENUE  
City-St-Zip: TALLAHASSEE, FL 32303

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 A. PLASTER

SEC

04/12/2005

Electronic Signature of Signing Officer or Director

Date