

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000093045

FILED
Feb 19, 2007
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:

1302 LIVE OAK PLANTATION ROAD
TALLAHASSEE, FL 32312

Current Mailing Address:

109 W. FOURTH AVENUE
TALLAHASSEE, FL 32303

New Mailing Address:

1302 LIVE OAK PLANTATION ROAD
TALLAHASSEE, FL 32312

FEI Number: 59-3754239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLASTER, MICHAEL
109 W. FOURTH AVENUE
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

PLASTER, MICHAEL
1302 LIVE OAK PLANTATION ROAD
TALLAHASSEE, FL 32312 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: JO A PLASTER

02/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PLASTER, L M
Address: 1302 LIVE OAK PLANTATION ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: D (X) Change () Addition
Name: PLASTER, JO A
Address: 1302 LIVE OAK PLANTATION ROAD
City-St-Zip: TALLAHASSEE, FL 32312

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: JO A PLASTER

S/T

02/19/2007

Electronic Signature of Signing Officer or Director

Date