2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000042841

Entity Name: JEROME'S MASONRY, INC.

LADY LAKE, FL 32159

City-St-Zip:

FILED Mar 23, 2009 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of | New Principal Place of Business: | |
|--------------------------------------|-----------------------------------|--------------------------------|---|--------------------------------------|--|
| 15437 S US HWY 441 | | | 505 SUNBELT ROAD | | |
| UNIT A | | | BUILDING G | | |
| SUMMER | FIELD, FL 344 | 91 | LADY LAKE, FL 32159 | | |
| Current N | lailing Addres | s: | New Mailing Address: | New Mailing Address: | |
| 15437 S U | IS HWY 441 | | P O BOX 508 | | |
| UNIT A | | | LADY LAKE, FL 32158 | | |
| SUMMER | FIELD, FL 344 | 91 | , | | |
| FEI Number | : 55-0787057 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired (X) | |
| Name and | d Address of C | urrent Registered Agent: | Name and Address of | New Registered Agent: | |
| LADY LAK | LM STREET (E, FL 32159 | US | | | |
| | e named entity s e of Florida. | submits this statement for the | purpose of changing its registered | office or registered agent, or both, | |
| SIGNATU | RE: | | | | |
| | Electron | ic Signature of Registered Ag | gent | Date | |
| Election Ca | mpaign Financing | Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | | |
| Title: | P () | Delete | Title: (|) Change () Addition | |
| Name: | WILSON, WILL | ΕJ | Name: | | |
| Address: | 40037 PALM ST | | Address: | | |
| City-St-Zip: | LADY LAKE, FL | 32159 | City-St-Zip: | | |
| Title: | ST () | Delete | Title: (|) Change ()Addition | |
| Name: | WILSON, SAND | RA R | Name: | | |
| Address: | 40037 PALM ST | REET | Address: | | |

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: WILLIE J WILSON P 03/23/2009