2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000076575

1. Entity Name
EARLEY MASONRY, INC.

Principal Place of Business	Mailing Address
4565 HAMWOOD STREET NORTH PORT, FL 34287	4565 HAMWOOD STREET NORTH PORT, FL 34287

DO NOT WRITE IN THIS SPACE

04072004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
02-0610985	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

EARLEY, RONALD A
4565 HAMWOOD STREET
NORTH PORT, FL 34287

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

U000000127476
04/23/04--80075-020 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	EARLEY, RONALD A
STREET ADDRESS	4565 HAMWOOD STREET
CITY-ST-ZIP	NORTH PORT, FL 34287
TITLE	DV
NAME	EARLEY, NATALIE L
STREET ADDRESS	4565 HAMWOOD STREET
CITY-ST-ZIP	NORTH PORT, FL 34287
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Ronald A. Earley_   4/20/04   (941)426-7775
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #