## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000056710

Entity Name: DONALD ROBERTS MASONRY, INC.

FILED Apr 28, 2008 Secretary of State

| Current Principal Place of Business:          |   |                                  | New Principal Place of                      | New Principal Place of Business:             |  |
|---|---|----------------------------------|---|--|--|
| 21433 49T<br>LAKE CIT                         | TH DRIVE<br>Y, FL 32024                             |                                  |   |  |  |
| Current Mailing Address:                      |   |                                  | New Mailing Address                         | New Mailing Address:                         |  |
| 21433 49T<br>LAKE CIT                         | TH DRIVE<br>Y, FL 32024                             |                                  |   |  |  |
| FEI Number                                    | : 20-0033444  | FEI Number Applied For ( )       | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: |   |                                  | Name and Address of                         | Name and Address of New Registered Agent:    |  |
|   | ETTIE M<br>MAIN BLVD.<br>Y, FL 32025                | US                               |   |  |  |
|   | e named entity<br>e of Florida.                     | submits this statement for the p | ourpose of changing its registered          | I office or registered agent, or both,       |  |
| SIGNATU                                       | RE:   |                                  |   |  |  |
|   | Electro   | nic Signature of Registered Age  | ent   | Date   |  |
| Election Car                                  | mpaign Financir                                     | ng Trust Fund Contribution ( ).  |   |  |  |
| OFFICERS AND DIRECTORS:                       |   |                                  | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | P (<br>ROBERTS, DO<br>21433 49TH D<br>LAKE CITY, FI | RIVE                             | Title:<br>Name:<br>Address:<br>City-St-Zip: | ()Change ()Addition                          |  |

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: DONALD R ROBERTS PRES 04/28/2008