

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000072278

FILED
Apr 27, 2007
Secretary of State

Entity Name: MASON CUSTOM FINISH CARPENTRY, INC.

Current Principal Place of Business:

805 CHESTNUT ST
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

805 CHESTNUT ST
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 20-0065345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASON, MICHAEL W
805 CHESTNUT ST
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MASON, MICHAEL W
Address: 318 INGLENOOK CIRCLE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: S () Delete
Name: FELLON, CHRISTOPHER
Address: 512 BRIGHTON WAY
City-St-Zip: CASSELBERRY, FL 32707

Title: T () Delete
Name: BITTMAN, JOHN
Address: 815 CHESTNUT ST
City-St-Zip: CLERMONT, FL 34711

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MASON, MICHAEL W
Address: 805 CHESTNUT STREET
City-St-Zip: CLERMONT, FL 34711

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: MASON, JOYCE L
Address: 805 CHESTNUT STREET
City-St-Zip: CLERMONT, FL 34711

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: MICHAEL W. MASON

D

04/27/2007

Electronic Signature of Signing Officer or Director

_____ Date