## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000073023

Entity Name: GLEN ELLISON MASONRY INC.

FILED Apr 12, 2006 Secretary of State

Current Principal Place of Business: New P	incipal Place of Business:
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6441 AMORY STREET 6441 AMORY ST.

ENGLEWOOD, FL 34224 US ENGLEWOOD, FL 34224 US

Current Mailing Address: New Mailing Address:

6441 AMORY STREET P.O BOX 1945 ENGLEWOOD, FL 34224 US RIVER RD.

ENGLEWOOD, FL 34224 US

FEI Number: 20-0066190 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ELLISON, GLEN BLLISON, GLEN M PRES
6441 AMORY STREET
ENGLEWOOD, FL 34224 US
ELLISON, GLEN M PRES
6441 AMORY STREET
ENGLEWOOD, FL 34224 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: GLEN ELLISON 04/12/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

Name:ELLISON, GLENName:ELLISON, GLENAddress:6441 AMORY STREETAddress:6441 AMORY ST.

City-St-Zip: ENGLEWOOD, FL 34224 US City-St-Zip: ENGLEWOOD, FL 34224 US

 Name:
 COSTA, JOSEPH
 Name:

 Address:
 4092 PELICAN SHORE CIRCLE E
 Address:

 City-St-Zip:
 ENGLEWOOD, FL 34223 US
 City-St-Zip:

Title: TR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 BOYLE, ROBERT
 Name:

 Address:
 4092 PELICAN SHORE CIRCLE
 Address:

 City-St-Zip:
 ENGLEWOOD, FL 34223 US
 City-St-Zip:

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: GLEN ELLISON PRES 04/12/2006