

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000073023

FILED  
Jan 11, 2007  
Secretary of State

Entity Name: GLEN ELLISON MASONRY INC.

## Current Principal Place of Business:

6441 AMORY ST.  
ENGLEWOOD, FL 34224 US

## New Principal Place of Business:

## Current Mailing Address:

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

## New Mailing Address:

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

## Name and Address of Current Registered Agent:

ELLISON, GLEN M PRES  
6441 AMORY STREET  
ENGLEWOOD, FL 34224 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: P ( ) Delete  
Name: ELLISON, GLEN  
Address: 6441 AMORY ST.  
City-St-Zip: ENGLEWOOD, FL 34224 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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

P

01/11/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date