2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094576

FILED Jan 17, 2009 Secretary of State

Entity Name: SOUTHERN MASONRY OF INDIAN RIVER COUNTY, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
523 4 PLA VERO BE	ACE SW ACH, FL 3296	2		
Current Mailing Address:		New Mailing Address:		
523 4 PLA VERO BE	CE SW ACH, FL 3296	52		
FEI Number	r: 54-2123312	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:	
FISCHER	, SCOTT B			
523 4 PLA		32 US		
523 4 PLA VERO BE The above	CESW ACH, FL 3296		purpose of changing its registere	d office or registered agent, or both,
523 4 PLA VERO BE The above	CE SW ACH, FL 3296 e named entity e of Florida.		purpose of changing its registere	d office or registered agent, or both,
523 4 PLA VERO BE The above in the Stat	CE SW ACH, FL 3296 e named entity e of Florida. RE:			d office or registered agent, or both, Date
523 4 PLA VERO BE The above in the Stat SIGNATU	CE SW ACH, FL 3296 e named entity e of Florida. RE: Electro	submits this statement for the		
523 4 PLA VERO BE The above in the Stat SIGNATU Election Ca	CE SW ACH, FL 3296 e named entity e of Florida. RE: Electro	submits this statement for the notes of the notes of Registered Agong Trust Fund Contribution ().	ent	
523 4 PLA VERO BE The above in the Stat SIGNATU Election Ca	ACE SW ACH, FL 3296 e named entity e of Florida. RE: Electrol mpaign Financin	submits this statement for the nic Signature of Registered Agg Trust Fund Contribution (). CTORS:) Delete DTT B SW	ent	Date

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: DANIEL B. SMITH OFF 01/17/2009