2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000121234

LEWIS J. BRANNON MASONRY, INC.



Principal Place of Business

Mailing Address

125 ROZIER BRANNON RD. DEFUNIAL SPGS, FL 32435 US

125 ROZIER BRANNON RD. DEFUNIAK SPGS, FL 32435

US

FILED Jan 05, 2007 08:00 AM Secretary of State

Fee Required



DO NOT WRITE IN THIS SPACE

01022007 No City-P	CR2E034 (11/05)		
4. FEI Number		Applied For	
56-2408593		Not Applicable	
5 Cortificate of Status Desired	<u> </u>	\$8.75 Additional	

6. Name and Address of Current Registered Agent

BRANNON, LEWIS J 125 ROZIER BRANNON RD. DEFUNIAK SPGS, FL 32435

DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired

8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Registered	Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	sing \Box	\$5.00 May Be Added to Fees		
10. TITLE NAME STREET ADDRESS CITY: ST-ZIP	OFFICERS AND DIRECT P BRANNON, LEWIS J 125 ROZIER BRANNON RD. DEFUNIAK SPGS, FL 32435	TORS			U00000576982	
TITLE NAME STREET ADDRESS CITY - ST-ZIP	SEC BRANNON, BETTY 125 ROZIER BRANNON RD DEFUNIAK SPGS, FL 32435				01/05/07-80008-009 150.00	
TITLE MAME SIREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN "	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			li:			
TOTLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby o	certify that the information supplied with this fil	ling does not qualify for the exer	nptions co	ntained in Chapter 119	9. Florida Statutes. I further certify that the information	

indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered