

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000125496

FILED
Apr 06, 2005
Secretary of State

Entity Name: STEVE AND STANLEY CREEL MASONRY, INC.

Current Principal Place of Business:

3604 JIMS COURT
GREEN COVE SPRINGS, FL 32043 US

New Principal Place of Business:

Current Mailing Address:

3604 JIMS COURT
GREEN COVE SPRINGS, FL 32043 US

New Mailing Address:

FEI Number: 14-1899804 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CREEL, LYDIA
3604 JIMS COURT
GREEN COVE SPRINGS, FL 32043 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: PRES () Delete
Name: CREEL, STEVE
Address: 3604 JIMS COURT
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: VP () Delete
Name: CREEL, STANLEY
Address: 5970 CAMPO DRIVE
City-St-Zip: KEYSTONE HEIGHTS, FL 32656 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: CREEL, DAVID
Address: 4671 ARMADILLO DR
City-St-Zip: MIDDLEBURG, FL 32068 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEVE CREEL

PRES

04/06/2005

Electronic Signature of Signing Officer or Director

Date