


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Sep 01, 2004 8:00 am**  
**Secretary of State**

09-01-2004 90003 003 \*\*\*150.00

<b>DOCUMENT #</b> <u>P03000131631</u>																																																																																																																	
<b>1. Entity Name</b> JOSEPH T. MASSE CARPENTRY, INC.																																																																																																																	
<b>Principal Place of Business</b> 3749 Austin Range Drive Land O'Lakes, FL 34639			<b>Mailing Address</b> Same																																																																																																														
<b>2. Principal Place of Business</b>			<b>3. Mailing Address</b>																																																																																																														
Suite, Apt. #, etc.			Suite, Apt. #, etc.																																																																																																														
City & State			City & State																																																																																																														
Zip		Country Pasco		<b>4. FEI Number</b> 65-1207763																																																																																																													
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>																																																																																																													
<b>6. Name and Address of Current Registered Agent</b> F. Timothy Bullard, C.P.A. P.O. Box 1066 5324 Land O'Lakes Blvd. Land O'Lakes, FL 34639				<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code																																																																																																													
<b>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.</b>																																																																																																																	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																																	
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <b>FILE NOW!!! FEE IS \$150.00</b>  <b>After May 1, 2004, Fee will be \$550.00</b>  <b>Make Check Payable to Florida Department of State</b> </div> <div style="width: 60%;"> <b>9. Election Campaign Financing</b>                  Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> </div> </div>																																																																																																																	
<div style="display: flex;"> <div style="width: 50%;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">President</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>Joseph T. Masse</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3749 Austin Range Drive</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>Land O'Lakes, FL 34639</td> <td></td> </tr> <tr> <td>TITLE</td> <td>Vice President</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>Antonella S. Masse</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3749 Austin Range Drive</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>Land O'Lakes, FL 34639</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table> </div> <div style="width: 50%;"> <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;"></td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	President	<input type="checkbox"/> Delete	NAME	Joseph T. Masse		STREET ADDRESS	3749 Austin Range Drive		CITY - ST - ZIP	Land O'Lakes, FL 34639		TITLE	Vice President	<input type="checkbox"/> Delete	NAME	Antonella S. Masse		STREET ADDRESS	3749 Austin Range Drive		CITY - ST - ZIP	Land O'Lakes, FL 34639		TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY - ST - ZIP		
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**12. I hereby certify that the information supplied with this filing does not qualify 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 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.**

**SIGNATURE:** Joseph T. Masse Pres 8/23/04

*Attachment  
52071151*  
**F. TIMOTHY BULLARD**  
CERTIFIED PUBLIC ACCOUNTANT

\*POST OFFICE BOX 1066  
LAND O' LAKES, FLORIDA 34639  
TELEPHONE (813) 996-6269

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August 25, 2004

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Joseph T. Masse Carpentry, Inc.  
FEI# 65-1207763

Please find enclosed check for payment of corporation annual fee for 2004. Taxpayer had previously mailed postcard stub in order to obtain a hard copy of the annual report but did not receive a report prior to receiving the Notice OF Intent To Dissolve card. This is a newly formed corporation making it's initial report filing and requests that the payment not be considered late due to these circumstances. Thank you for your consideration in this matter.

Sincerely,

  
F. Timothy Bullard, C.P.A.  
Registered Agent For Company