## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000027786

HOOD, TERRY

P O BOX 446

BONIFAY, FL 32425

Name: Address:

City-St-Zip:

**FILED** Mar 21, 2006 Secretary of State

**Entity Name: HOOD MASONRY INC Current Principal Place of Business: New Principal Place of Business:** 207 MCKENNON AVE 3029 MAIN STREET BONIFAY, FL 32425 VERNON, FL 32462 **Current Mailing Address: New Mailing Address:** P O BOX 446 BONIFAY, FL 32425 FEI Number: 20-0737547 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: HOOD, TERRY HOOD, TERRY 207 MĆKENNON AVE 3029 MAIN STREET VERNON, FL 32462 US BONIFAY, FL 32425 US 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: TERRY HOOD 03/21/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition HOOD, TERRY Name: Name: P O BOX 446 Address: Address: City-St-Zip: BONIFAY, FL 32462 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: HOOD, TERRY Name: P O BOX 446 Address: Address: BONIFAY, FL 32462 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition HOOD, RYAN Name: Name: 2516 MACK BROCK RD Address: Address: City-St-Zip: BONIFAY, FL 32425 City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: TERRY HOOD 03/21/2006