

ANNUAL REPORT

DOCUMENT # P04000028052

1. Entity Name
RT MASONRY, INC.



FILED
Jul 05, 2005 08:00 AM
Secretary of State

Principal Place of Business
7604 FERRARA STREET
ORLANDO, FL 32819 US

Mailing Address
7604 FERRARA STREET
ORLANDO, FL 32819 US



06292005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
01-0808290

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TAYLOR, BARBARA A
7604 FERRARA STREET
ORLANDO, FL 32819

**DO NOT WRITE
IN THIS SPACE**

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

Barbara A. Taylor

(NOTE: Registered Agent signature required when reinstating)

DATE

6-29-05

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	TAYLOR, BARBARA ANNE
STREET ADDRESS	19522 RALSTON STREET
CITY-ST-ZIP	ORLANDO, FL 32833
TITLE	S
NAME	THOMAS, JERMAINE
STREET ADDRESS	7604 FERRARA STREET
CITY-ST-ZIP	ORLANDO, FL 32819
TITLE	P
NAME	THOMAS, RON
STREET ADDRESS	7604 FERRARA STREET
CITY-ST-ZIP	ORLANDO, FL 32819
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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07/05/05-80004-017 158.75

**DO NOT WRITE
IN THIS SPACE**

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:

Ron Thomas

6-29-05

407-568-4929

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Date

Florida Phone #