

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000075596

Entity Name: MASONRY TECHNIQUES, INC.

FILED
May 02, 2007
Secretary of State

Current Principal Place of Business:

16847 OAK HILL RD
HILLIARD, FL 32046

New Principal Place of Business:

14220 DEADWOOD LANE
HILLIARD, FL 32046

Current Mailing Address:

16847 OAK HILL RD
HILLIARD, FL 32046

New Mailing Address:

14220 DEADWOOD LANE
HILLIARD, FL 32046

FEI Number: 20-2055818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEARSON SR., JACKIE
16847 OAK HILL RD
HILLIARD, FL 32046 US

Name and Address of New Registered Agent:

PEARSON SR., JACKIE
14220 DEADWOOD LANE
HILLIARD, FL 32046 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:

05/02/2007

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: PEARSON, JACKIE L
Address: 16847 OAK HILL RD
City-St-Zip: HILLIARD, FL 32046

Title: S () Delete
Name: SHEFFIELD, PATRICIA A
Address: 14243 MAY ACRES LANE
City-St-Zip: JACKSONVILLE, FL 32218

Title: V () Delete
Name: SHEFFIELD, PATRICIA A
Address: 14243 MAY ACRES LANE
City-St-Zip: JACKSONVILLE, FL 32218

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: PATRICIA SHEFFIELD

V

05/02/2007

Electronic Signature of Signing Officer or Director

Date