

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000133877

Entity Name: JS MASON INC

FILED  
Jul 07, 2005  
Secretary of State

## Current Principal Place of Business:

PO BOX 177  
LAKE ALFRED, FL 338500177

## New Principal Place of Business:

4182 VISTA DEL LAGO DRIVE  
WINTER HAVEN, FL 33881

## Current Mailing Address:

PO BOX 177  
LAKE ALFRED, FL 338500177

## New Mailing Address:

4182 VISTA DEL LAGO DRIVE  
WINTER HAVEN, FL 33881

FEI Number: 38-3708114

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JAMES, DESMOND  
918 E ALFRED DR  
LAKE ALFRED, FL 338502405 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

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: D ( ) Delete  
Name: JAMES, DESMOND  
Address: PO BOX 177  
City-St-Zip: LAKE ALFRED, FL 338500177

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: JAMES, DESMOND  
Address: 4182 VISTA DEL LAGO DRIVE  
City-St-Zip: WINTER HAVEN, FL 33881

Title: O ( ) Change (X) Addition  
Name: KING, VINNIE R  
Address: 4182 VISTA DEL LAGO DRIVE  
City-St-Zip: WINTER HAVEN, FL 33881

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: VINNIE R. KING

O

07/07/2005

Electronic Signature of Signing Officer or Director

Date