## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000098781

Entity Name: WEST FLORIDA HARDSCAPING AND BRICK INC.

FILED Apr 23, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1663 PLUMTREE ROAD HOLIDAY, FL 34690 1663 PLUM TREE ROAD HOLIDAY, FL 34690 HOLIDAY, FL 34690

Current Mailing Address: New Mailing Address:

1663 PLUMTREE ROAD HOLIDAY, FL 34690 1663 PLUM TREE ROAD HOLIDAY, FL 34690

FEI Number: 26-0121002 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VERALDI, ANTHONY J
1663 PLUMTREE ROAD
HOLIDAY, FL 34690 US

VERALDI, ANTHONY J
1663 PLUM TREE ROAD
HOLIDAY, FL 34690 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: 04/23/2008

Electronic Signature of Registered Agent Date

Title:

VΡ

Election Campaign Financing Trust Fund Contribution ( ).

( ) Delete

## **OFFICERS AND DIRECTORS:**

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 VERALDI, ANTHONY J
 Name:
 VERALDI, ANTHONY J

 Address:
 1663 PLUMTREE ROAD
 Address:
 1663 PLUM TREE ROAD

Address: 1663 PLUMTREE ROAD Address: 1663 PLUM TREE ROAD
City-St-Zip: HOLIDAY, FL 34690 City-St-Zip: HOLIDAY, FL 34690

Name:NAPIERALA, MAUREEN MName:NAPIERALA, MAUREEN MAddress:1663 PLUMTREE ROADAddress:1663 PLUM TREE ROADCity-St-Zip:HOLIDAY, FL 34690City-St-Zip:HOLIDAY, FL 34690

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: ANTHONY J. VERALDI PRES 04/23/2008