

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000037792

Entity Name: BREVARD MASONRY, INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

605 ALBATROSS STREET
MERRITT ISLAND, FL 32952

New Principal Place of Business:

177 S BANANA RIVER DR.
MERRITT ISLAND, FL 32952

Current Mailing Address:

605 ALBATROSS STREET
MERRITT ISLAND, FL 32952

New Mailing Address:

P.O. BOX 332
CAPE CANAVERAL, FL 32920

FEI Number: 75-3211728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPES, ANGELO J
605 ALBATROSS STREET
MERRITT ISLAND, FL 32952 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOPES, ANGELO J
Address: 605 ALBATROSS STREET
City-St-Zip: MERRITT ISLAND, FL 32952

Title: VP () Delete
Name: ELLIOTT, GREGORY
Address: 2510 MARLOWE PLACE
City-St-Zip: COCOA, FL 32926

Title: S () Delete
Name: SAURER, VALERIE E
Address: 291-D CAPE SHORES CIRCLE
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: T () Delete
Name: SAURER, VALERIE E
Address: 291-D CAPE SHORES CIRCLE
City-St-Zip: CAPE CANAVERAL, FL 32920

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:

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: VALERIE SAURER

S-T

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date