

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2007 8:00 am
Secretary of State

04-20-2007 90084 025 ***158.75

DOCUMENT # P06000064531

1. Entity Name
MICHAEL QUICK MASONRY INC.



Principal Place of Business

~~1594 TENNESSEE STREET~~
~~ALFORD, FL 32420 US~~

Mailing Address

~~1594 TENNESSEE STREET~~
~~ALFORD, FL 32420 US~~

2. Principal Place of Business - No P.O. Box #

405 PLEAS CIRCLE

Suite Apt # etc

3. Mailing Address

405 PLEAS CIRCLE

Suite, Apt #, etc

City & State

CHIPLEY FL

City & State

CHIPLEY FL

Zip

32428

Country

USA

Zip

32428

Country

USA

04182007

Chg-P

CR2E034 (12/06)

4. FEI Number

90-4809646

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

QUICK, MICHAEL

~~1594 TENNESSEE STREET~~
~~ALFORD, FL 32420~~

CHANGE ADDRESS →

Name

Street Address (P.O. Box Number is Not Acceptable)

405 PLEAS CIRCLE

City

CHIPLEY

FL

Zip Code

32428

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P.D. ☐ Delete
NAME QUICK, MICHAEL
STREET ADDRESS ~~1594 TENNESSEE STREET~~
CITY ST ZIP ~~ALFORD, FL 32420~~

TITLE VP.D. ☒ Delete
NAME PEACOCK, STEPHANIE
STREET ADDRESS 1594 TENNESSEE STREET
CITY ST ZIP ALFORD, FL 32420

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 405 PLEAS CIRCLE
CITY ST ZIP CHIPLEY FL 32428

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE VP.D. ☐ Change ☒ Addition
NAME ANNISE E. SHIRAH
STREET ADDRESS 405 PLEAS CIRCLE
CITY ST ZIP CHIPLEY FL 32428

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Michael S. Quick
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-07

Date

(850-573-2163)
Daytime Phone #