2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000015789

Entity Name: JOE HOSTETLER MASONRY, INC.

FILED Mar 16, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1421 DARYL DR. SARASOTA, FL 34232

Current Mailing Address: New Mailing Address:

1421 DARYL DR. SARASOTA, FL 34232

FEI Number: 65-0400730 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:

HOSTETLER, JOSEPH A
1421 DARYL DR.
SARASOTA, FL 34232 US
HOSTETLER, WILMA PRES.
1421 DARYL DR.
SARASOTA, FL 34232 US
SARASOTA, FL 34232 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: WILMA HOSTETLER 03/16/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

1421 DARYL DR.

SARASOTA, FL 34232

Name: Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: HOSTETLER, JOSEPH A Name: HOSTETLER, WILMA

 Address:
 1421 DARYL DR.
 Address:
 1421 DARYL DR.

 City-St-Zip:
 SARASOTA, FL 34232
 City-St-Zip:
 SARASOTA, FL 34232

Title: S () Delete Title: T (X) Change () Addition

 Name:
 HOSTETLER, WILMA
 Name:
 HOSTETLER, JOSEPH A

 Address:
 1421 DARYL DR.
 Address:
 1421 DARYL DR.

 City-St-Zip:
 SARASOTA, FL 34232
 City-St-Zip:
 SARASOTA, FL 34232

Title: T () Delete Title: VPD (X) Change () Addition

 Name:
 HOSTETLER, JESSE
 Name:
 HOSTETLER, JESSE

 Address:
 1421 DARYL DR.
 Address:
 1421 DARYL DR.

 City-St-Zip:
 SARASOTA, FL 34232
 City-St-Zip:
 SARASOTA, FL 34232

Title: VPD (X) Delete Title: () Change () Addition Name: HOSTETLER, JOSEPH D Name:

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: WILMA HOSTETLER D 03/16/2009