2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# P94000068819

Entity Name: MOORE'S MASONRY, INC.

Current Principal Place of Business:

6317 CRAWFORDVILLE ROAD
TALLAHASSEE, FL 32305

New Principal Place of Business:

Current Mailing Address:

6317 CRAWFORDVILLE ROAD
TALLAHASSEE, FL 32305

New Mailing Address:

FEI Number: 59-3274742 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WOODS, THOMAS F
GATLIN, WOODS, CARLSON & COWDERY
1709-D MAHAN DRIVE
TALLAHASSEE, FL 32308 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: D ( ) Delete
Name: MOORE, THOMAS C
Address: 6317 CRAWFORDVILLE ROAD
City-St-Zip: TALLAHASSEE, FL 32310

Title: S ( ) Delete
Name: BAHORSKI, ZACHARY T
Address: RT. 3 BOX 107, B-1
City-St-Zip: MONTICELLO, FL 32344

Title: T ( ) Delete
Name: MOORE, SANDRA C
Address: 6317 CRAWFORDVILLE ROAD
City-St-Zip: TALLAHASSEE, FL 32310

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MOORE, THOMAS C
Address: 6317 CRAWFORDVILLE ROAD
City-St-Zip: TALLAHASSEE, FL 32305

Title: S (X) Change ( ) Addition
Name: BAHORSKI, ZACHARY T
Address: 8527 YASHUNTAFUN ROAD
City-St-Zip: TALLAHASSEE, FL 32311

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: THOMAS C. MOORE D 04/27/2005

Electronic Signature of Signing Officer or Director — Date