

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000085806

Entity Name: EAST COAST MASONRY, INC.

FILED
Jul 07, 2008
Secretary of State

Current Principal Place of Business:

1408 NO KILLIAN DRIVE
STE 210
LAKE PARK, FL 33403 US

Current Mailing Address:

1408 NO KILLIAN DRIVE
STE 210
LAKE PARK, FL 33403 US

FEI Number: 65-0537147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COUTIER, GORDON
1408 NO KILLIAN DRIVE
STE 210
LAKE PARK, FL 33403 US

New Principal Place of Business:

1408 N KILLIAN DRIVE
SUITE 210
LAKE PARK, FL 33403 US

New Mailing Address:

1408 N KILLIAN DRIVE
SUITE 210
LAKE PARK, FL 33403 US

Name and Address of New Registered Agent:

CLOUTIER, JAYSON
1408 N KILLIAN DRIVE
SUITE 210
LAKE PARK, FL 33403 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: JAYSON CLOUTIER

07/07/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CLOUTIER, GORDON
Address: 18931 SYCAMORE DR.
City-St-Zip: LOXAHATCHEE, FL 33470

Title: VP () Delete
Name: CLOUTIER, JAYSON
Address: 5864 NW CAROVEL AVE.
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: ST (X) Delete
Name: CLOUTIER, JEREMY
Address: 5759 NW CONE ST
City-St-Zip: PORT SAINT LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLOUTIER, JAYSON
Address: 5864 NW CAROVEL AVE
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: VP (X) Change () Addition
Name: CLOUTIER, JEREMY
Address: 18931 W SYCAMORE DR
City-St-Zip: LOXAHATCHEE, FL 33470

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: JAYSON CLOUTIER

P

07/07/2008

Electronic Signature of Signing Officer or Director

Date