

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000000117

Entity Name: PALM MASONRY, INC.

FILED
Jan 28, 2009
Secretary of State

Current Principal Place of Business:

PO BOX 1408
FLAGLER BEACH, FL 32136

New Principal Place of Business:

530 COUNTY ROAD, 2009 LAKE DISSTON
BUNNELL, FL 32110

Current Mailing Address:

PO BOX 1408
FLAGLER BEACH, FL 32136

New Mailing Address:

530 COUNTY ROAD, 2009 LAKE DISSTON
BUNNELL, FL 32110

FEI Number: 59-3353578

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AZARIAN, SANDRA B
1908 N CENTRAL AVENUE
FLAGLER BEACH, FL 32136 US

Name and Address of New Registered Agent:

AZARIAN, SANDRA B
530 COUNTY ROAD, 2009 LAKE DISSTON
BUNNELL, FL 32110 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:

01/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AZARIAN, SANDRA B
Address: P O BOX 1408
City-St-Zip: FLAGLER BEACH, FL 32136

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: AZARIAN, SANDRA B
Address: 530 COUNTY ROAD, 2009 LAKE DISSTON
City-St-Zip: BUNNELL, FL 32110

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: SANDRA B AZARIAN

PRES

01/28/2009

Electronic Signature of Signing Officer or Director

Date