## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**CORPORATION ANNUAL REPORT** 

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600003614 (0)
I.B. WILLIAMS MASONRY INC.

## **FILED** Apr 29 1998 8:00am Secretary of State



B-12					
· ·	of Business	Mailing Address	•	4 10011001 110 10110 01111 00111 00111	##111 ##1## 2141# #41#1 11#1 #1#1 1##]
6883 CRILL AVE 6883 CRILL AVE PALATKA FL 32177 PALATKA FL 32177				N. T. 110 00 10 C	
				DO NOT WRITE II  3. Date Incorporated or Qualified	N THIS SPACE
1				01/08/1996	
2. Principal Pla	ace of Business	2a. Mailing Address	1100	4, FEI Number	Applied For
21 100	CYPRSS Dr.	26 V.O. DO	)x 485	59-3350702	Not Applicable
Suite, Apt. #		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	HWICK 71	28 BOSHWI	OK 71	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	70000	Country	8. This corporation owes or has paid	
24 54	Name and Address of Cur	rent Registered Agent	30 USA	Personal Property Tax due June 3  10. Name and Address of New Regi	
Will	LIAMS, BRENDA J	Tell negistered Agent	81 Name	/ Name and Address of New York	C IOO C
	3 CRILL AVE		90 (5) (5)	SIMPERT K. MITTI	MIN
	ATKA FL 32177		82 Street Add	dress (P.O. Box Number is Not Acceptable	<del>:</del> )
	•		83		
			84 City		85 Zip Code .
			\	OSTWICK	FL 32007
	a the provisions of Soctions 607 (	1502 and 607.1508, Florida Statu	utes, the above-named cor	rporation submits this statement for the pu	rpose of changing its registered
office or re	egistered agent, or both, in the St.	ate of Florida. Such change was	authorized by the corpora	ation's board of directors, Thereby accept	
office or re	egistered agent, or both, in the St n familiar with, and accept the of	ate of Florida. Such change was ligations of Section 607.0505, f	s authorized by the corpora Torida Statutes.	anon's board of directors. Thereby accept	II IN GO
office or re	egistered agent, or both, in the St in familiar with, and accept the ob-	ligations of Section 607.0505, F	s authorized by the corpora lorida Statutes.  **Derly K.**  **DIE-Registered Agent signature requirements**	williams	U-19-98
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indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.