

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000097305

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: MASONRY INFORMATION TECHNOLOGISTS, INC.

**Current Principal Place of Business:**

304 KACHUBA COURT  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

304 KACHUBA COURT  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

304 KACHUBA COURT  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

304 KACHUBA COURT  
ALTAMONTE SPRINGS, FL 32701

FEI Number: 59-3477625

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

GULDE, C JAMES  
304 KACHUBA CT  
SUITE 107  
ALTAMONTE SPRINGS, FL 32701 US

**Name and Address of New Registered Agent:**

GULDE, C JAMES  
304 KACHUBA CT  
ALTAMONTE SPRINGS, FL 32701 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:

01/07/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete

Name: GULDE, C JAMES

Address: 304 KACHUBA CT

City-St-Zip: ALTAMONTE SPRINGS, FL 32701

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition

Name:

Address:

City-St-Zip:

Title: S ( ) Delete

Name: GULDE, DOROTHY

Address: 304 KACHUBA CT

City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: C JAMES GULDE

P

01/07/2009

Electronic Signature of Signing Officer or Director

Date