

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P99000030601

1. Entity Name  
DICKINSON MASONRY, INC.



Principal Place of Business  
13064 KITE ROAD  
BROOKSVILLE, FL 34614

Mailing Address  
13064 KITE ROAD  
BROOKSVILLE, FL 34614

**FILED**  
**Apr 16, 2008 08:00 AM**  
**Secretary of State**



02272008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3563690	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

DICKINSON, RAYMOND  
13064 KITE ROAD  
BROOKSVILLE, FL 34614

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	DICKINSON, RAYMOND
STREET ADDRESS	13064 KITE ROAD
CITY-ST-ZIP	BROOKSVILLE, FL 34614

TITLE	ST
NAME	DICKINSON, SARAH
STREET ADDRESS	13064 KITE ROAD
CITY-ST-ZIP	BROOKSVILLE, FL 34614

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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000000901615  
04/29/08-80077-017 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Raymond Dickinson  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

✓ 4/9/08 352 796-7681  
Date Daytime Phone #