

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2001 8:00 am
Secretary of State

05-19-2001 90277 024 ***150.00

768427

DO NOT WRITE IN THIS SPACE

DOCUMENT # H47129
1. Entity Name
 Classic Masonry, Inc.

Principal Place of Business **Mailing Address**
 103 E. Lauren Ct. 103 E. Lauren Ct.
 Fern Park, Fl. 32730 Fern Park, Fl. 32730

2. Principal Place of Business **3. Mailing Address**
~~10616 Moore Road~~ ~~685-B Georgia Ave.~~
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **City & State**
 Gotha, Florida Longwood, Florida
Zip **Country** **Zip** **Country**
 34734 USA 32750 USA

4. FEI Number **Applied For**
 54-1322836 Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 DeLude, Edward G.
 103 East Lauren Court
 Fern Park, Florida 32730

7. Name and Address of New Registered Agent
Name Rosa L. DeVore
Street Address (P.O. Box Number is Not Acceptable)
 685-B Georgia Avenue
City Longwood **FL** **Zip Code** 32750

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.
SIGNATURE *Rosa DeVore* **DATE** 4/27/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	PT	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
		Hood, Joseph Jr	103 East Lauren Court	Fern Park, Florida 32730	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PT	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
		Hood, Joseph Sr.	10616 Moore Road	Gotha, Florida 34734	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	S	Hood, Joseph Joel	10616 Moore Road	Gotha, Florida 34734	<input type="checkbox"/>	<input checked="" type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Rosa DeVore* **DATE:** 4/27/01 **DAYTIME PHONE #:** (407)830-0297
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)