


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000089906 1. Entity Name A-1 MASONRY, INC.	
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Principal Place of Business 4919 HOLLY AVENUE YOUNGSTOWN, FL 32466	Mailing Address 4919 HOLLY AVENUE YOUNGSTOWN, FL 32466
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DO NOT WRITE IN THIS SPACE



04202007 No Chg-P CR2E034 (11/05)

4. FEI Number 51-0510764	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

COATNEY, MARTIN D SR
 4919 HOLLY AVENUE
 YOUNGSTOWN, FL 32466

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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 _____ DATE _____
Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST COATNEY, MARTIN D SR 4919 HOLLY AVENUE YOUNGSTOWN, FL 32466
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COATNEY, MARTIN D JR 5020 HOLLY AVE YOUNGSTOWN, FL 32466
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST COATNEY, MARTIN D SR 4919 HOLLY AVE YOUNGSTOWN, FL 32466
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 05/07/07-800006-008 150.00

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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: *Martin D. Coatney*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-07 850-722-9272
Date Daytime Phone #