2005 FOR PROFIT CORPORATION

Apr 13, 2005 8:00 am Secretary of State **ANNUAL REPORT** 04-13-2005 90056 046 ***158.75 DOCUMENT # G09432 1. Entity Name QUALITY GRASSING AND SERVICES, INC. Mailing Address Principal Place of Business 17502 HIGHWAY 672 17502 HIGHWAY 672 **P.O. DRAWER 108 P.O. DRAWER 108** LITHIA, FL 33547 LITHIA, FL 33547 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03162005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-2233851 Not Applicable Country Zip Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BARNES, IRENE Street Address (P.O. Box Number is Not Acceptable) WEST HWY 672,1 1/2 MI. W OF HWY 39 SOUTH LITHIA, FL 33547 City Zip Code 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 project name of registered agent and ritle if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Asst. Vice President PD TITLE ☐ Delete TITLE Change Addition Thomas, Donald BARNES, PHOWARD NAME NAME 3917 Powerline Road 17502 HWY 672 STREET ADDRESS STREET ADDRESS Lithia, FL 33547 CITY-ST-7IP CITY-ST-ZIP LITHIA, FL 00000 Asst. Treasurer HILL STD ☐ Delete HILE ☐ Change Addition Anchinsko Robert 1115 S. Bradway Ave. BARNES, IRENE J NAME NAME STREET ADDRESS 17502 HWY 672 STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Bartow FL 33830 LITHIA, FL 00000 VD TITLE ☐ Detete TITLE ☐ Change ☐ Addition THOMAS, J W NAME NAME ... STREET ADDRESS 1202 PELOTE CEMETARY RD STREET ADDRESS CITY-ST-ZIP LITHIA, FL CITY-ST-ZIP 00000 AVP TITLE ☐ Delete TITLE ☐ Change ■ Addition PRICE, ROBERT C NAME NAME STREET ADDRESS 2320 TERRA CEIA BAY BLVD, #401 STREET ADDRESS PALMETTO, FL 34221 CHY-SI-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition ARMSTRONG, JAMES L NAME NAME STREET ADDRESS 1202 PELOTE CEMETARY ROAD STREET ADDRESS CITY-ST-ZIP LITHIA, FL 33547 C!TY-ST-ZIP AVP TITLE ☐ Defete TITLE ☐ Change Addition NAME BARNES, THOMAS H NAME STREET ADDRESS 901 WOODVIEW DRIVE STREET ADDRESS

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

CITY-ST-ZIP

BRANDON, FL 33511

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR SIGNATURE: 813 X34-3326