2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G09432

Entity Name: Q.G.S. DEVELOPMENT, INC.

FILED Apr 24, 2006 Secretary of State

•	-,, -, -, -					
Current Principal Place of Business:			New Principal Place of Business:			
17502 HIGI P.O. DRAV LITHIA, FL	VER 108					
Current Mailing Address:			New Maili	New Mailing Address:		
17502 HIGI P.O. DRAV LITHIA, FL	VER 108					
FEI Number:	59-2233851	FEI Number Applied For ()	FEI Number Not Appl	licable () Certificate of Status Desired ()		
Name and	Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:		
BARNES, I WEST HW LITHIA, FL	Y 672,1 1/2 M	I. W OF HWY 39 SOUTH				
The above in the State		submits this statement for the pu	ırpose of changing it	its registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electror	nic Signature of Registered Ager	nt	Date		
Election Can	npaign Financin	g Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PD (BARNES, P HO 17502 HWY 67 LITHIA, FL	•	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	STD (BARNES, IREN 17502 HWY 67 LITHIA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	THOMAS, J W,	Delete CEMETARY RD 00000,	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	PRICE, ROBER	EIA BAY BLVD, #401	Title: Name: Address: City-St-Zip:	AVP (X) Change () Addition DONALD THOMAS, 3917 POWERLINE ROAD LITHIA, FL 33547		
Title: Name: Address: City-St-Zip:	ARMSTRONG,	CEMETARY ROAD	Title: Name: Address: City-St-Zip:	AVP (X) Change () Addition ARMSTRONG, JAMES L 9901 BAY DRIVE GIBSONTON, FL 33534		
Title: Name: Address: City-St-Zip:	AVP (BARNES, THOI 901 WOODVIE BRANDON, FL	W DRIVE	Title: Name: Address: City-St-Zip:	AVP (X) Change () Addition BARNES, THOMAS H 1313 VERSANT DR.; APT. 102 BRANDON, FL 33511		

I hereby certify that the information supplied with this filing does not qualify for the 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: IRENE J. BARNES STD 04/24/2006