2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H90458

City-St-Zip:

Entity Name: QUALLSCO, INC.

FILED Jan 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 768 BEAL PKWY NW STE AQ FORT WALTON BEACH, FL 32547 **New Mailing Address: Current Mailing Address:** 768 BEAL PKWY NW STE AQ FORT WALTON BEACH, FL 32547 FEI Number: 59-2609133 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: QUALLS, AL P. JR. 768 BEAL PKWY NW STE AQ US FT. WALTON BEACH, FL 32548 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition QUALLS, AL P. JR., Name: Name: 768 BEAL PKWY NW STE AQ Address: Address: City-St-Zip: FT. WALTON BEACH, FL 32547 City-St-Zip: Title: VD Title: () Delete () Change () Addition Name: QUALLS, PEGGY. Name: 768 BEAL PKWY NW STE AQ Address: Address: FT. WALTON BEACH, FL 32547 City-St-Zip: City-St-Zip: Title: Title: SD () Delete SD (X) Change () Addition JONES, JOHNNIE D JONES, JOHNNIE D Name: Name: 768 BEAL PONY NW STE AQ 768 BEAL PKWY NW STE AQ Address: Address: City-St-Zip: FORT WALTON BEACH, FL 32547 City-St-Zip: FORT WALTON BEACH, FL 32547 Title: () Delete Title: CFO () Change (X) Addition QUALLS, DONALD L Name: Name: Address: Address: 768 BEAL PKWY NW STE AQ

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

FORT WALTON BEACH, FL 32547

SIGNATURE: DONALD QUALLS CFO 01/28/2008