


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Aug 29, 2005 8:00 am**  
**Secretary of State**

07-20-2005 90027 003 \*\*\*150.00

<b>DOCUMENT # P95000009518</b> 1. Entity Name <b>QUALITY CUSTOM COATING, INC.</b>																							
Principal Place of Business <b>102 34TH STREET W BRADENTON FL 34205</b>			Mailing Address <b>102 34TH STREET W BRADENTON FL 34205</b>																				
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.																					
City & State		City & State																					
Zip	Country	Zip	Country	4. FEI Number <b>65-0559634</b> <div style="float: right;"> <input type="checkbox"/> Applied For  <input type="checkbox"/> Not Applicable         </div>																			
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				1st MOORE CR2E034 (10/04)																			
6. Name and Address of Current Registered Agent  <b>CHAMBERLAIN, TERRY L 102 34TH STREET W BRADENTON FL 34205</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 <u>Terry L Chamberlain Pres.</u> <u>Quality Custom Coating, Inc.</u> <u>July 16/2005</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when not starting)</small>																							
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing <b>\$5.00 May Be</b> Trust Fund Contribution. <input type="checkbox"/> <b>Added to Fees</b>																				
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <b>10. OFFICERS AND DIRECTORS</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>STREET ADDRESS</td> <td>CHAMBERLAIN, TERRY L</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>102 34TH STREET W BRADENTON FL 34205</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">NAME</td> <td style="width: 20%; text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	NAME	<input type="checkbox"/> Delete	STREET ADDRESS	CHAMBERLAIN, TERRY L		CITY- ST- ZIP	102 34TH STREET W BRADENTON FL 34205		TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS			CITY- ST- ZIP		
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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.																							
SIGNATURE: <u>Terry L Chamberlain</u> <u>July 16/2005</u> <u>941-750-9067</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																							

ATTACHMENT  
*Ullrich*  
**Quality Custom Coatings**  
102 34<sup>th</sup> St. West  
Bradenton, FL 34205  
941-750-9067

August 23, 2005

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: P95000009518

Dear Sir/Madam:

This is to acknowledge receipt of your letter dated July 22, 2005 of which I was very surprised. Please check my payment history and you will see I have always paid before the May deadline.

I have had my accountant check into this matter and the check never cleared the bank. We had been having trouble with mail being stolen out of our mailboxes, which is what I suspect happened. We now take our mail to the post office.

I realize I do owe the \$400.00 and will gladly pay it. However, I am asking that you accept monthly payments of \$200.00 each to pay this outstanding balance. I will make one payment in September and one in October.

Again, I ask you to please check my payment history and you will see that I have always paid early. This was just an oversight and I hope you will accept the payment plan.

Please contact me as soon as possible as I do not want to lose my incorporation status. Thank you.

Sincerely,

*Terry L Chamberlain*  
Terry Chamberlain

TC/ac



ATTACHMENT

1060285 RECEIVED

05 AUG 26 AM 10:00

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

July 22, 2005

QUALITY CUSTOM COATING, INC.  
102 34TH STREET W  
BRADENTON, FL 34205

Subject: QUALITY CUSTOM COATING, INC.

Reference Number: P95000009518

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the profit annual report/uniform business report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/SC

ANNUAL REPORTS SECTION