

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 852827

FILED
Apr 14, 2009
Secretary of State

Entity Name: QUALIFIED CONTRACTORS, INC.

Current Principal Place of Business:

2024 CAPITAL DRIVE
WILMINGTON, NC 28405 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 2216
SCHENECTADY, NY 123012216 US

New Mailing Address:

FEI Number: 56-1330938

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: HARVELL, STAN G
Address: 2024 CAPITAL DRIVE
City-St-Zip: WILMINGTON, NC 28405

Title: VP () Delete
Name: MAXSTADT, RICHARD
Address: 12 CORPORATE WOODS BLVD
City-St-Zip: ALBANY, NY 12211 US

Title: D () Delete
Name: TULLMAN, ROBERT M
Address: 1302 NORTH 19TH ST
City-St-Zip: TAMPA, FL 33605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STANLEY
Address: 2024 CAPITAL DRIVE
City-St-Zip: WILMINGTON, NC 28405 US

Title: V (X) Change () Addition
Name: RICHARD
Address: 12 CORPORATE WOODS BLVD.
City-St-Zip: ALBANY, NY 12211 US

Title: D (X) Change () Addition
Name: ROBERT
Address: 1302 NORTH 19TH ST
City-St-Zip: TAMPA, FL 33605 US

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.

SIGNATURE: RICHARD MAXSTADT

V

04/14/2009

Electronic Signature of Signing Officer or Director

Date