

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 852827

Entity Name: QUALIFIED CONTRACTORS, INC.**Current Principal Place of Business:**2446 GREENS ROAD
HOUSTON, TX 77032**Current Mailing Address:**P.O. BOX 2216
SCHENECTADY, NY 12301-2216 US**FEI Number: 56-1330938****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US*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**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT
Name WOOD, MICHAEL L
Address 201 NORTH FRANKLIN STREET
City-State-Zip: TAMPA FL 33602

Title ATTORNEY-IN-FACT
Name MAXSTADT, RICHARD T
Address 12 CORPORATE WOODS BLVD.
City-State-Zip: ALBANY NY 12211

Title VP, TREASURER
Name WILLIAMS, MORGAN
Address 201 NORTH FRANKLIN STREET
City-State-Zip: TAMPA FL 33602

Title DIRECTOR
Name ZACK, PAUL
Address 201 NORTH FRANKLIN STREET
City-State-Zip: TAMPA FL 33602

Title DIRECTOR
Name ZACK, PAUL
Address 201 NORTH FRANKLIN STREET
City-State-Zip: TAMPA FL 33602

I hereby 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 all other like empowered.

SIGNATURE: RICHARD T MAXSTADT**ATTORNEY-IN-FACT****04/23/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date