2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

09-18-2003 90029 033 ***550.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 399687

1. Entity Name
QUALITY DEVELOPERS, INC

Principal Place of Business	Mailing Address
219 S TENN AVE P O BOX 1761 LAKELAND FL 33802	219 S TENN AVE P O BOX 1761 LAKELAND FL 33802

[redacted]

2. Principal Place of Business	3. Mailing Address
310 E. Memorial Blvd.	310 e. Memorial Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Lakeland FL	City & State: Lakeland FL
Zip: 33801 Country:	Zip: 33801 Country:

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-1420911 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WELCH,JAMES S 4616 KIMBALL CT W LAKELAND FL 33803	Name Street Address (P.O. Box Number is Not Acceptable) 310 E. Memorial Blvd. City Lakeland FL Zip Code 33801

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
After September 10, 2003 Fee will be $750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WELCH,JAMES S 219 S TENN AVE LAKELAND FL	☐ Delete	310 E. Memorial Blvd Lakeland, FL 399687	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WARNOCK, ROBERT E. 310 E. MEMORIAL BLVD. LAKELAND FL	☐ Delete	Same	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WARNOCK, CARL C. 310 E. MEMORIAL BLVD. LAKELAND FL	☐ Delete	Same	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S HESS, NADINE W. 219 S. TENNESSEE AVE. LAKELAND FL	☐ Delete	Same	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	SP	☐ Change ☐ Addition

CR2E034 (4/03)

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: SIGNATURE REQUIRED TD Carl C. Warnock 9/6/03 863-6822111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #