

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 561605

FILED
Mar 27, 2009
Secretary of State

Entity Name: QUALITY CONTRACTORS, INC.

Current Principal Place of Business:

PO BOX 2191
224 2ND ST SW
WINTER HAVEN, FL 33883 US

New Principal Place of Business:

224 2ND ST SW
WINTER HAVEN, FL 33880 US

Current Mailing Address:

PO BOX 2191
224 2ND ST SW
WINTER HAVEN, FL 33883 US

New Mailing Address:

P.O. BOX 2191
WINTER HAVEN, FL 33883 US

FEI Number: 59-1806289

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, LESTER WILSON
312 RANKIN RD.
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

GATLIN, KIP
224 2ND STREET SW
WINTER HAVEN, FL 33880 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: KIP GATLIN

03/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DAVIS, LESTER WILSON
Address: 312 RANKIN RD.
City-St-Zip: WINTER HAVEN, FL 33881

Title: STD (X) Delete
Name: DAVIS, BRADLEY W
Address: 312 RANKIN ROAD
City-St-Zip: WINTER HAVEN, FL 33881

Title: STD (X) Delete
Name: DAVIS, PHYLLIS F
Address: 312 RANKIN ROAD
City-St-Zip: WINTER HAVEN, FL 33881

Title: VPD () Delete
Name: GATLIN, KIP
Address: 108 OWEN CIR SOUTH
City-St-Zip: AUBURNDAL, FL 33823

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: DAVIS, LESTER WILSON
Address: 312 RANKIN RD.
City-St-Zip: WINTER HAVEN, FL 33881

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: GATLIN, KIP
Address: 108 OWEN CIR SOUTH
City-St-Zip: AUBURNDAL, FL 33823

Title: STD () Change (X) Addition
Name: GATLIN, MICHELLE M
Address: 108 OWNE CIR SOUTH
City-St-Zip: AUBURNDAL, FL 33823

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: KIP GATLIN

PRES

03/27/2009

Electronic Signature of Signing Officer or Director

Date