## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 654386** 

Entity Name: QUINCY CORPORATION

FILED Feb 13, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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190 MANNIE GUNN RD QUINCY, FL 32351

Current Mailing Address: New Mailing Address:

190 MANNIE GUNN RD QUINCY, FL 32351

FEI Number: 59-1988844 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WEATHERFORD, BOB J.

12 GILCREASE LANE
QUINCY, FL 32351 US

SMITH, DON
190 MANNIE GUNN ROAD
QUINCY, FL 32351 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: DON SMITH 02/13/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD () Delete Title: () Change () Addition

 Name:
 ZENSEN, DENNIS C,
 Name:

 Address:
 299 ROSE HILL DRIVE EAST
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32312
 City-St-Zip:

Title: ST () Delete Title: ST (X) Change () Addition Name: WEATHERFORD, BOB J, Name: BENNITT, FRED

Address: 12 GILCREASE LANE Address: 90 GLADE DRIVE
City-St-Zip: QUINCY, FL 32351 City-St-Zip: KITTANNING, PA 16201

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 ELZALAKI, MONIR K
 Name:
 ELZALAKI, MONIR K

 Address:
 2626 E PARK AVE APT 18201
 Address:
 87 LAKES BLVD

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:
 DAYTON, NV 89403

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: MONIR ELZALAKI P 02/13/2008