

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725578

FILED  
Mar 16, 2012  
Secretary of State

Entity Name: CQ MANAGEMENT, INC.

**Current Principal Place of Business:**

101 NORTH RIVERSIDE DR.  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

**Current Mailing Address:**

101 NORTH RIVERSIDE DR.  
NEW SMYRNA BEACH, FL 32168

**New Mailing Address:**

FEI Number: 59-1507551      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MARLOWE, MIRIAM  
101 N RIVERSIDE DR #102  
NEW SMYRNA BEACH, FL 32168      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

**OFFICERS AND DIRECTORS:**

Title: DO  
Name: CROWLEY, TIMOTHY  
Address: 101 N RIVERSIDE DR #705  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: TREA  
Name: ALLISON, FELIX W  
Address: 101 N RIVERSIDE DR #612  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: VP  
Name: BELCHER, DON  
Address: 101 N RIVERSIDE DR #709  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: PRES  
Name: JONES, CHRISTOPHER  
Address: 101 N RIVERSIDE DR #708  
City-St-Zip: NEW SMYRNA BCH, FL 32168

Title: DO  
Name: SIMONIN, EDGAR  
Address: 101 N. RIVERSIDE DR #604  
City-St-Zip: NEW SMYRNA BCH, FL 32168

Title: SEC  
Name: WAGNER, DOROTHY W  
Address: 101 N. RIVERSIDE DR #703  
City-St-Zip: NEW SMYRNA BCH, FL 32168

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALLISON, FELIX W.

TREA

03/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date