

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006592

FILED  
Jan 08, 2008  
Secretary of State

Entity Name: QUARRY COMMUNICATIONS, INC.

## Current Principal Place of Business:

4566 HIGHWAY 20 EAST, STE 204  
NICEVILLE, FL 32578

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 5248  
NICEVILLE, FL 32578

## New Mailing Address:

4566 HIGHWAY 20 EAST, STE 204  
NICEVILLE, FL 32578

FEI Number: 58-2178630

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCDORMAN, MICHAEL  
4566 HIGHWAY 20 EAST, STE 204  
NICEVILLE, FL 32578 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CP ( ) Delete  
Name: MCDORMAN, MICHAEL W  
Address: 121 7TH STREET  
City-St-Zip: NICEVILLE, FL 32578

Title: VST ( ) Delete  
Name: MCDORMAN, JOSEPH C  
Address: 4566 HIGHWAY 20 EAST, STE 204  
City-St-Zip: NICEVILLE, FL 32578

Title: DV ( ) Delete  
Name: LOUDERMILK, BARRY D  
Address: 654 JOE FRANK HARRIS PKWY  
City-St-Zip: CARTERSVILLE, GA 30120

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change ( ) Addition  
Name: MCDORMAN, MICHAEL W  
Address: 3 LANMAN ROAD  
City-St-Zip: NICEVILLE, FL 32578

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

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

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: MICHAEL W MCDORMAN

CP

01/08/2008

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

\_\_\_\_\_  
Date