

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000002409

Entity Name: A+ QUALITY MELONS INC.

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7049 HWY 127 NORTH  
CROSSVILLE, TN 38571

**New Principal Place of Business:**

7049 HWY 127 NORTH  
CROSSVILLE, TN 38571 UN

**Current Mailing Address:**

102 NE 931ST ST  
BRANFORD, FL 32008

**New Mailing Address:**

FEI Number: 27-4158942      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ELLIOTTE, RONDA R  
102 NE 931ST ST  
BRANFORD, FL 32008 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: CP  
Name: MAYNARD, ROSS L JR  
Address: 7049 HWY 127 NORTH  
City-St-Zip: CROSSVILLE, TN 38571

Title: ST  
Name: ELLIOTTE, RONDA R  
Address: 102 NE 931ST ST  
City-St-Zip: BRANFORD, FL 32008

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

SIGNATURE: RONDA R ELLIOTTE

ST

02/07/2012

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

\_\_\_\_\_  
Date