2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Secretary of State DOCUMENT # F95000005670 QUINCY FOODS, INC. Principal Place of Business Mailing Address P.O. BOX 1488 P.O. BOX 1488 DOTHAN, AL 36304 US DOTHAN, AL 36304 US 01192004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 63-1104928 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MOORE, ROY DO NOT WRITE 1509 WEST JEFFERSON STREET QUINCY, FL 32351 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ___UU::000610231 01/22/04-80023-014 150.00 TITLE NAME RONEY, JAMES STREET ADDRESS 403 PINECREST DRIVE CITY-ST-ZIP DOTHAN, AL 38301 TITLE BOYD, CHARLES NAME STREET ADDRESS 438 PEACH FARM ROAD ASHFORD, AL 36312 CITY-ST-ZIP me NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CXTY-53-23P MLE MAME STREET ADDRESS CITY-57-73P

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other himself powered.

SIGNATURE:

TITLE NAME STREET ADDRESS CRY-ST-ZIP

FILED Jan 22, 2004 08:00 AM