## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

**SIGNATURE** 

AND TYPED OR PRINTED NAME OF

## Aug 16, 2007 8:00 am Secretary of State DOCUMENT # G75655 08-16-2007 90015 036 \*\*\*150.00 QUALITY SHEET METAL SERVICES, INC. Principal Place of Business Mailing Address 40129303 220 CEDAR CREEK ROAD 220 CEDAR CREEK ROAD PALATKA, FL 32177 US PALATKA, FL 32177 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08072007 CR2E034 (12/06) Cha-P City & State City & State 4. FEI Number Applied For 59-2353545 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MALOY, RONALD LEE John F. Tolson, Jr Street Address (P.O. Box Number is Not Acceptable) 220 CEDAR CREEK ROAD PALATKA, FL 32177 462 Kingsley Ave. Ste. Orange Park 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 " ped or printed name of registered, igent and title if applicable 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Due by September 14, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10: TITLE THLE Change **X** Delete President MALOY, RONALD LEE SR. NAME: NAME Maloy, Ronald Lee Jr. 220 Cedar Creek Road STREET ADDRESS 220 CEDAR CREEK ROAD STREET ADDRESS CITY-ST-ZIP PALATKA, FL 32177 CITY-ST-ZIP Palatka, Fl. 32177 TITLE TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change XIX Addition Vice President, Sec. NAME Maloy, Willis Larry Sr. STREET ADDRESS STREET ADDRESS 14211 Country Place Rd. CITY-ST-ZIP CITY-ST-7IP <del>Jacksonville, Fl. 32226</del> Change TITLE ☐ Delcte TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if chapter do not not a state 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 in Block 10 or Block 11 if changed, or on an attachm

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