

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J40700

1. Entity Name

Q & I, INC.

Principal Place of Business

508-A SOUTH PALAFOX ST.
PENSACOLA FL 32501

Mailing Address

508-A SOUTH PALAFOX ST.
PENSACOLA FL 32501

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2748962

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

OBERHAUSEN, LAWRENCE W.
506 SOUTH PALAFOX ST
PENSACOLA FL 32501

7. Name and Address of New Registered Agent

Name

GEORGE F. OVERBY JR.

Street Address (P.O. Box Number is Not Acceptable)

3800 DUNNING DR.

City

PACE

FL

Zip Code

32571

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

01/19/01

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE DP
NAME OVERBY, GEORGE F.
STREET ADDRESS 508 A S. PALAFOX ST.
CITY-ST-ZIP PENSACOLA FL

☐ Delete

TITLE ST
NAME OVERBY JR, GEORGE F
STREET ADDRESS 3800 DUNNING DR
CITY-ST-ZIP PACE FL 32571

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change ☐ Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE F. OVERBY

03/30/01

Date

850-438-6636

Daytime Phone #

FILED
Apr 04, 2001 8:00 am
Secretary of State

04-04-2001 90134 034 ***150.00

737617



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)