FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K88750** **(0)**

1. Corporation Name
Q & LC CO., INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
% MARY L. CARTER 8826 TRILBY AVENUE JACKSONVILLE FL 32222	% MARY L. CARTER 8826 TRILBY AVENUE JACKSONVILLE FL 32222

3. Date Incorporated or Qualified: **05/17/1989**
3a. Date of Last Report: **04/19/1994**

2. Principal Place of Business
21: 1711 Chaffee Rd S
22: Suite, Apt. #, etc.
23: City & State: Jacksonville FL
24: Zip: 32221
25: Country: DuvaL

2a. Mailing Address
26: 1711 Chaffee Rd S
27: Suite, Apt. #, etc.
28: City & State: Jacksonville FL
29: Zip: 32221
30: Country: Duval

4. FEI Number: **59-2949221** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CARTER, MARY L.
8826 TRILBY AVENUE
JACKSONVILLE FL 32222

10. Name and Address of New Registered Agent

81 Name: CARTER, MARY L.
82 Street Address (P.O. Box Number is Not Acceptable): 1711 Chaffee Rd. S.
83:
84 City: Jacksonville FL 85 Zip Code: 32221

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Mary L Carter, Vice Pres./Secretary — DATE: 4-30-95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when changing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	11 TITLE	☒ Change ☐ Addition PT
NAME	CARTER, QUITMAN E.	12 NAME	CARTER, Quitman E.
STREET ADDRESS	3370 ROCKY BRANCH LN	13 STREET ADDRESS	[redacted] 1711 Chaffee Rd S.
CITY-ST-ZIP	ORANGE PARK FL	14 CITY-ST-ZIP	Jacksonville, FL 32221
TITLE	VS	21 TITLE	☒ Change ☐ Addition VS
NAME	CARTER, MARY L.	22 NAME	CARTER, MARY L.
STREET ADDRESS	3370 ROCKY BRANCH LN	23 STREET ADDRESS	1711 Chaffee Rd S.
CITY-ST-ZIP	ORANGE PARK FL	24 CITY-ST-ZIP	Jacksonville, FL 32221
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mary L Carter MARY L. CARTER 4/30/95 9230568
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Business Phone #

0023487 CP