2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K88750

Country

6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

1. Entity Name

City & State

CARTER, MARY L.

1711 CHAFFEE RD. S JACKSONVILLE FL 32221

9. This corporation is eligible to satisfy its Intangible

CARTER, QUITMAN E. 1711 CHAFFEE RD. S

JACKSONVILLE FL

CARTER, MARY L.

JACKSONVILLE FL

1711 CHAFFEE RD. S

Tax filing requirement and elects to do so.

Zip

SIGNATURE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIE TITLE

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE NAME

TITLE

NAME STREET ADDRESS

11.

(See criteria on back)

Q & LC CO., INC. Principal Place of Business Mailing Address 1711 CHAFFEE RD. S 1711 CHAFFEE RD. S IACKSONVILLE FL 32221 JACKSONVILLE FL 32221-1865 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

Delete

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12.

STREET ADDRESS

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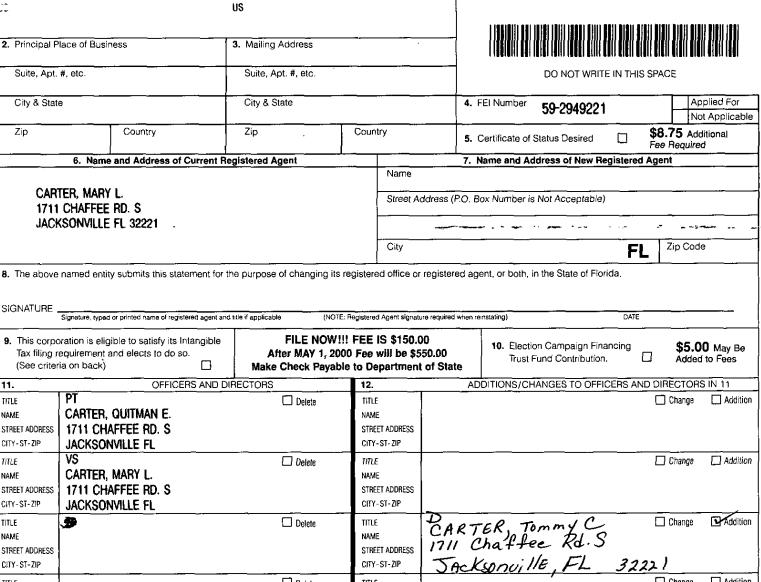
Name

City

Zip

FILED May 10, 2000 8:00 am Secretary of State

05-10-2000 90112 040 ***150.00



CITY-ST-ZIP CITY-ST-ZIP 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

4-28-2000 904-181-585

Change

☐ Change

Addition

Addition