

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021266

Entity Name: QCE, L.L.C.

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

3013 DEL PRADO BLVD. UNIT #13
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

3013 DEL PRADO BLVD. UNIT #13
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 51-0420429

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, GLENN A
3013 DEL PRADO BLVD., UNIT #13
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: HISLOP, JOHN
Address: 3013 DEL PRADO BLVD. UNIT #13
City-St-Zip: CAPE CORAL, FL 33904

Title: MGR () Delete
Name: ADAMS, WARWICK
Address: 3013 DEL PRADO BLVD. UNIT #13
City-St-Zip: CAPE CORAL, FL 33904

Title: MGRM () Delete
Name: ALLEN, GLENN
Address: 3013 DEL PRADO BLVD. UNIT #13
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GLENN ALLEN

COO

01/04/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date