

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032210

Entity Name: QN, LLC

FILED
Feb 21, 2005
Secretary of State

Current Principal Place of Business:

2141 C ROAD
LOXAHATCHEE, FL

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 211391
ROYAL PALM BEACH, FL 33421

New Mailing Address:

P.O. BOX 211391
ROYAL PALM BEACH, FL 33421

FEI Number: 20-0180299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

QUINN, CARMEN L
6342 120TH AVENUE N.
WEST PALM BEACH, FL 33412 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: MGRM () Delete
Name: QUINN, JOSEPH J
Address: P.O. BOX 211391
City-St-Zip: ROYAL PALM BEACH, FL 33421

Title: MGRM () Delete
Name: QUINN, CARMEN L
Address: P.O. BOX 211391
City-St-Zip: ROYAL PALM BEACH, FL 33421

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: QUINN, JOSEPH J
Address: P.O. BOX 211391
City-St-Zip: ROYAL PALM BEACH, FL 33421

Title: MGRM (X) Change () Addition
Name: QUINN, CARMEN L
Address: P.O. BOX 211391
City-St-Zip: ROYAL PALM BEACH, FL 33421

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: CARMEN QUINN

MNGR

02/21/2005

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