

**2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000067645

**FILED**  
**Oct 28, 2008**  
**Secretary of State****Entity Name:** QLC LLC**Current Principal Place of Business:**12995 S. CLEVELAND AVE  
SUITE # 49  
FT MYERS, FL 33907**New Principal Place of Business:****Current Mailing Address:**12995 S. CLEVELAND AVE  
SUITE # 49  
FT MYERS, FL 33907**New Mailing Address:**11083 LAKELAND CIRCLE  
FT MYERS, FL 33913**FEI Number:** 20-3188107**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**QUINN, PATRICK J  
11083 LAKELAND CIRCLE  
FT MYERS, FL 33913 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/MANAGERS:**Title: MGRM ( ) Delete  
Name: QUINN, PATRICK J  
Address: 11083 LAKELAND CIRCLE  
City-St-Zip: FT MYERS, FL 33913Title: MGRM ( ) Delete  
Name: QUINN, PAMELA K  
Address: 11083 LAKELAND CIRCLE  
City-St-Zip: FT MYERS, FL 33913Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: MGR ( ) Change (X) Addition  
Name: FRITSCHER, ANDREW M  
Address: 11083 LAKELAND CIRCLE  
City-St-Zip: FORT MYERS, FL 33913Title: MGR ( ) Change (X) Addition  
Name: CEDOTAL, CHERYL  
Address: PO BOX 4012  
City-St-Zip: COVINGTON, LA 70434

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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:** PATRICK J QUINN

MGR

10/28/2008

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