

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L30007

**FILED**  
**Feb 06, 2012**  
**Secretary of State**

**Entity Name:** QUALITY MOBILE HOMES, INC.

**Current Principal Place of Business:**

12627 SAN JOSE BLVD. #604  
JACKSONVILLE, FL 32223 US

**New Principal Place of Business:**

850737 HWY. 17  
YULEE, FL 32097 US

**Current Mailing Address:**

12627 SAN JOSE BLVD. #604  
JACKSONVILLE, FL 32223 US

**New Mailing Address:**

850737 HWY. 17  
YULEE, FL 32097 US

**FEI Number:** 59-2975843

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SEYBERT, TOM  
12627 SAN JOSE BLVD. #604  
JACKSONVILLE, FL 32223 US

**Name and Address of New Registered Agent:**

SEYBERT, TOM  
850737 HWY. 17  
YULEE, FL 32097 US

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

02/06/2012

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SEYBERT, TOM J  
Address: 2220 HAWK CREST  
City-St-Zip: ST. JOHNS, FL 32259

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: TOM SEYBERT

P

02/06/2012

Electronic Signature of Signing Officer or Director

Date