2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2002 8:00 AM
Secretary of State

DOCUMENT# L96838

Entity Name: QUALITY COMPUTER FORMS, INC.

Current Principal Place of Business:

2900 14TH STREET N
SUITE 36
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

835 S HIGH STREET
HILLSBORO, OH 45133 US

New Mailing Address:

FEI Number: 59-3026252 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CASSNER, ALVIN B
4301 GULFSHORES BLVD
UNIT 302 PARK PLAZA
NAPLES, FL 33940 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CASSNER, ALVIN B.,
Address: 4301 GULF SHORE BLVD.
City-St-Zip: NAPLES, FL

Title: T ( ) Delete
Name: CASSNER, BRIAN
Address: 835 S HIGH ST
City-St-Zip: HILLSBORO, OH

Title: V ( ) Delete
Name: CASSNER, JON H.,
Address: 835 S. HIGH ST.
City-St-Zip: HILLSBORO, OH

Title: S ( ) Delete
Name: CASSNER, CATHY L
Address: 835 S HIGH ST
City-St-Zip: HILLSBORO, OH

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CASSNER, ALVIN B.,
Address: 2900 14TH STREET N SUITE 36
City-St-Zip: NAPLES, FL

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 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 an address, with all other like empowered.

SIGNATURE: BRIAN CASSNER T 01/21/2002

Electronic Signature of Signing Officer or Director Date