

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Jan 15, 2005  
Secretary of State

DOCUMENT# N02000002837

Entity Name: QAJAQ USA, INC.

**Current Principal Place of Business:**

1217 BENT OAK TRAIL  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

1217 BENT OAK TRAIL  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

FEI Number: 02-0583840

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STAMER, GREGORY P  
1217 BENT OAK TRAIL  
ALTAMONTE SPRINGS, FL 32714 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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: STAMER, GREGORY  
Address: 1217 BENT OAK TRAIL  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: V (X) Delete  
Name: ATTENBOROUGH, KEITH  
Address: 18 FERRELL ST  
City-St-Zip: NEWBURYPORT, MA 01950

Title: T/D ( ) Delete  
Name: BRAUN, DAVID  
Address: 4959 PINESPAR TRL  
City-St-Zip: TRAVERSE CITY, MI 49684

Title: D ( ) Delete  
Name: DOUCETTE, VERNON  
Address: 67 SPARKS STREET  
City-St-Zip: CAMBRIDGE, MA 02138

Title: D ( ) Delete  
Name: GOLDEN, HARVEY  
Address: 2000 SE 47TH  
City-St-Zip: PORTLAND, OR 97215

Title: D ( ) Delete  
Name: SNOW, ROBIN  
Address: 5926 RIDGE AVENUE  
City-St-Zip: PHILADELPHIA, PA 19128

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY P. STAMER

P

01/15/2005

Electronic Signature of Signing Officer or Director

Date