

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
May 03, 2009  
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 ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**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: D      ( ) Delete  
Name: JENNIFER, TORRES  
Address: 109 N. 21ST AVE  
City-St-Zip: HATTIESBURG, MS 39401

Title: T/D      ( ) Delete  
Name: BEN, FULLER  
Address: 88 MASON COVE LN.  
City-St-Zip: CUSHING, ME 04563

Title: D      ( ) Delete  
Name: NANCY, THORNTON  
Address: 1215 E. M113  
City-St-Zip: KINGSLEY, MI 49649

Title: D      ( ) Delete  
Name: JOHN, DOORNINK  
Address: 17686 VIKING WAY NW  
City-St-Zip: POULSBO, WA 98370

**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:

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 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

05/03/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date