

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002837

FILED
May 03, 2009
Secretary of State

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:

Name and Address of New Registered Agent:

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

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: POULSBORO, 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