2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 07, 2007
Secretary of State

DOCUMENT# N04000004305

Entity Name: TOP QUALITY TEEN QUEEN (TQ2A) ASSOCIATION, INC.

Current Principal Place of Business:

1940 SIPES AVE
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

1940 SIPES AVE
SANFORD, FL 32771

New Mailing Address:

FEI Number: 20-0968626 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

HONOR-LANE, R ANDREA
1940 SIPES AVE
SANFORD, FL 32771 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: D ( ) Delete
Name: CANNON, NETTIE H
Address: 3262 LIPSCOMB PLACE
City-St-Zip: ORLANDO, FL 32805

Title: D ( ) Delete
Name: CANNON, VICTOR D
Address: 770 SQUIRREL CT
City-St-Zip: KISSIMMEE, FL 34759

Title: D ( ) Delete
Name: HONOR-LANE, R ANDREA
Address: 1940 SIPES AVE
City-St-Zip: SANFORD, FL 32771

Title: D (X) Delete
Name: LANE, EUGENE E
Address: 1940 SIPES AVE
City-St-Zip: SANFORD, FL 32771

Title: D ( ) Delete
Name: THOMPSON, ANITA G
Address: 1150 ROUND LAKE COURT
City-St-Zip: OVIEDO, FL 32765

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: ANDREA HONOR CEO 06/07/2007

Electronic Signature of Signing Officer or Director — Date