

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011983

FILED
Apr 19, 2009
Secretary of State

Entity Name: AFFORDABLE QUALITY SERVICES, INC.

Current Principal Place of Business:

1875 ALLENDALE DRIVE
CLEARWATER, FL 33760 US

New Principal Place of Business:

Current Mailing Address:

1875 ALLENDALE DRIVE
CLEARWATER, FL 33760 US

New Mailing Address:

FEI Number: 20-2061058

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUSKAS, IRIS L
1875 ALLENDALE DR
CLEARWATER, FL 33760 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: PUSKAS, IRIS L
Address: POB: 3254
City-St-Zip: CLEARWATER BEACH, FL 33767 US

Title: S/TR () Delete
Name: MATONTE, PHILIP J
Address: POB: 3185
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: V () Delete
Name: JACKSON, LONI
Address: P.O. BOX 3254
City-St-Zip: CLEARWATER BEACH, FL 33767

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:

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: LONI JACKSON

V

04/19/2009

Electronic Signature of Signing Officer or Director

Date