

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N25948

**FILED**  
**Nov 29, 2012**  
**Secretary of State**

**Entity Name:** REX QUALITY CORPORATION

**Current Principal Place of Business:**

P. O. BOX 1107  
LAKE WALES, FL 338591107 US

**New Principal Place of Business:**

805 CAMBRIDGE WAY  
LAKE WALES, FL 33853 US

**Current Mailing Address:**

P. O. BOX 1107  
LAKE WALES, FL 338591107 US

**New Mailing Address:**

**FEI Number:** 59-3112547

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MACKENZIE, NORMAN  
802 CHAMBERLAIN LOOP  
LAKE WALES, FL 33853 US

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

DRAGONETTI, SUSAN M  
706 CAMBRIDGE WAY  
LAKE WALES, FL 33853 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: SUSAN M. DRAGONETTI

11/29/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: CLARK, MARK E  
Address: 805 CAMBRIDGE WAY  
City-St-Zip: LAKE WALES, FL 33853

Title: S/T  
Name: DRAGONETTI, SUSAN M  
Address: 706 CAMBRIDGE WAY  
City-St-Zip: LAKE WALES, FL 33853

Title: D  
Name: GRUHN, DALE  
Address: 750 CAMBRIDGE WAY  
City-St-Zip: LAKE WALES, FL 33853

Title: D  
Name: NOLEN, JILL  
Address: 729 CAMBRIDGE WAY  
City-St-Zip: LAKE WALES, FL 33853

I hereby 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 all other like empowered.

SIGNATURE: SUSAN M. DRAGONETTI

S/T

11/29/2012

Electronic Signature of Signing Officer or Director

Date