

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000001880

**FILED**  
**May 02, 2011**  
**Secretary of State**

**Entity Name:** FLORIDA QUALITY COUNCIL, INC.

**Current Principal Place of Business:**

6378 BUENA VISTA DR  
MARGATE, FL 33063

**New Principal Place of Business:**

1532 SE 11TH STREET  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

P.O. BOX 782  
DELEON SPRINGS, FL 32130

**New Mailing Address:**

1532 SE 11TH STREET  
DEERFIELD BEACH, FL 33441

**FEI Number:** 65-0912144

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIXON, CINDI  
6378 BUENA VISTA DR  
MARGATE, FL 33063 US

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

WALZAK, REBECCA  
1532 SE 11TH STREET  
DEERFIELD BEACH, FL 33441 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: REBECCA B. WALZAK

05/02/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: WALZAK, REBECCA  
Address: 1532 SE 11TH STREET  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: VP  
Name: DIXON, CINDI  
Address: 6378 BUENA VISTA DRIVE  
City-St-Zip: MARGATE, FL 32608

Title: TREA  
Name: PATRICK, SHARON  
Address: 4455 MILLS RD  
City-St-Zip: DELAND, FL 32724

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: REBECCA B. WALZAK

PRES

05/02/2011

Electronic Signature of Signing Officer or Director

Date