

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000059908

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: QUALITY DRIVER CONNECTION, INC.

## Current Principal Place of Business:

7295 S. MAXWELL PT.  
HOMOSASSA, FL 34446

## New Principal Place of Business:

## Current Mailing Address:

7295 S. MAXWELL PT.  
HOMOSASSA, FL 34446

## New Mailing Address:

POBOX 3779  
HOMOSASSA, FL 34447

FEI Number: 59-3655418

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AUSTIN, RUTHANN  
7295 S. MAXWELL POINT  
HOMOSASSA, FL 34446 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCD ( ) Delete  
Name: AUSTIN, TROY R  
Address: 7295 S MAXWELL PT  
City-St-Zip: HOMOSASSA, FL 34446

Title: VPTS ( ) Delete  
Name: AUSTIN, RUTHANN  
Address: 7295 S MAXWELL PT  
City-St-Zip: HOMOSASSA, FL 34446

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUTHANN AUSITN

VP

04/14/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date