

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000042898

FILED  
May 18, 2005  
Secretary of State

Entity Name: QUALITY BUILDERS OF NORTH FLORIDA, INC.

## Current Principal Place of Business:

3595 NW 76 LANE  
JENNINGS, FL 32053

## New Principal Place of Business:

## Current Mailing Address:

3595 NW 76 LANE  
JENNINGS, FL 32053

## New Mailing Address:

FEI Number: 59-3713631

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WISER, JOE P  
3595 NW 76 LANE  
JENNINGS, FL 32053 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: D ( ) Delete  
Name: WISER, JOE P  
Address: 3595 NW 76 LANE  
City-St-Zip: JENNINGS, FL 32053

Title: D ( ) Delete  
Name: WISER, KIMBERLY  
Address: 3595 NW 76 LANE  
City-St-Zip: JENNINGS, FL 32053

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WISER, JOE P P  
Address: 3595 NW 76 LANE  
City-St-Zip: JENNINGS, FL 32053

Title: VP (X) Change ( ) Addition  
Name: WISER, JASON VP  
Address: 3595 NW 76 LANE  
City-St-Zip: JENNINGS, FL 32053

Title: T ( ) Change (X) Addition  
Name: WISER, JOSHUA T  
Address: 3595 NW 76 LANE  
City-St-Zip: JENNINGS, FL 32053

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOE PAUL WISER

P

05/18/2005

Electronic Signature of Signing Officer or Director

Date