

**FILED**  
**May 21, 2002 8:00 am**  
**Secretary of State**

DOCUMENT # P01000066483 Certified Mail # 7001 1940 0006 5532 1325  
1. Entity Name  
QUICK & RIGHT CONSTRUCTION, INC.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business 4861 Bell Meade Dr. Suite, Apt. #, etc.	3. Mailing Address 4861 Bell Meade Dr. Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State Sarasota, FL		City & State Sarasota, FL		4. FEI Number 65-1114818		Applied For Not Applicable	
Zip 34232	Country US	Zip 34232	Country US	5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
FRY, LELAND R.

Street Address (P.O. Box Number is Not Acceptable)  
4861 Bell Meade Dr.

City  
Sarasota

FL

Zip Code  
34232

8. 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**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

DATE \_\_\_\_\_

**9.** This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**January 1 - May 1 Fee is \$150.00**  
**After May 1, Fee is \$550.00**  
**Amended UBR is \$61.25**  
**Make Check Payable to Department of State**

**10. Election Campaign Financing Trust Fund Contribution.** ☐ **\$5.00** May Be Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE	D
NAME	Fry, Leland R.
STREET ADDRESS	4861 Bell Meade Dr.
CITY, ST, ZIP	Sarasota, FL 34232

TITLE  
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STREET ADDRESS  
CITY - ST - ZIP

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CITY- ST- ZIP

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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

Boke

Daytime Phone: 4

CR2E034B (12/01)