

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000121666

Entity Name: Q.C. PAVERS, INC.

FILED  
Mar 04, 2003  
Secretary of State

## Current Principal Place of Business:

625 MAIN ST, STE 20  
WINDERMERE, FL 34786

## New Principal Place of Business:

2800 KISSIMMEE BAY CIR  
KISSIMMEE, FL 34744

## Current Mailing Address:

625 MAIN ST, STE 20  
WINDERMERE, FL 34786

## New Mailing Address:

2800 KISSIMMEE BAY CIR  
KISSIMMEE, FL 34744

FEI Number: 59-3755761

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LARSON, TIMOTHY J  
625 MAIN ST, STE 20  
WINDERMERE, FL 34786

## Name and Address of New Registered Agent:

LARSON, TIMOTHY J  
2800 KISSIMMEE BAY CIR  
KISSIMMEE, FL 34744

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: TIMOTHY J LARSON

03/04/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LARSON, TIMOTHY J  
Address: 625 MAIN ST, STE 20  
City-St-Zip: WINDERMERE, FL 34786

Title: D ( ) Delete  
Name: PEROCK, CHARLES M JR  
Address: W 238 N 7085  
City-St-Zip: SUSSEX, WI 53089

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: LARSON, TIMOTHY J  
Address: 2800 KISSIMMEE BAY CIR  
City-St-Zip: KISSIMMEE, FL 34744

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TIMOTHY LARSON

D

03/04/2003

Electronic Signature of Signing Officer or Director

Date