

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000004602

FILED
Apr 27, 2006
Secretary of State

Entity Name: QUALITY ROOFING & REPAIRS, INC.

Current Principal Place of Business:

2520 87TH AVE
VERO BEACH, FL 32966

New Principal Place of Business:

805 11TH CT. S.W.
VERO BEACH, FL 32962

Current Mailing Address:

2520 87TH AVE
VERO BEACH, FL 32966

New Mailing Address:

805 11TH CT.
VERO BEACH, FL 32962

FEI Number: 30-0138985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POLLY, BOBBY
2520 87TH AVE
VERO BEACH, FL 32966 US

Name and Address of New Registered Agent:

POLLY, BOBBY
805 11TH CT. S.W.
VERO BEACH, FL 32962 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:

04/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPTS () Delete
Name: POLLY, BOBBY
Address: 2520 87TH AVE
City-St-Zip: VERO BEACH, FL 32966

Title: DV () Delete
Name: POLLY, DONNIE H
Address: 2520 87TH AVE
City-St-Zip: VERO BEACH, FL 32966

Title: TS () Delete
Name: POLLY, TINA
Address: 2520 87TH AVE
City-St-Zip: VERO BEACH, FL 32966

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTS (X) Change () Addition
Name: POLLY, BOBBY
Address: 805 11TH CT. S.W.
City-St-Zip: VERO BEACH, FL 32962

Title: DVT (X) Change () Addition
Name: POLLY, DONNIE H
Address: 635 63RD AVE.
City-St-Zip: VERO BEACH, FL 32968

Title: S (X) Change () Addition
Name: POLLY, PAULETTE
Address: 635 63RD AVE.
City-St-Zip: VERO BEACH, FL 32968

I hereby certify that the information supplied with this filing does not qualify for the 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: DONNIE H POLLY

DVT

04/27/2006

Electronic Signature of Signing Officer or Director

Date