

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 8:00 am
Secretary of State

05-01-2008 90235 029 ***150.00

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|---|---|--|---|
| DOCUMENT # P03000031072 1. Entity Name QUALITY CARE MAINTENANCE SERVICES, INC. | | | |
| Principal Place of Business 4116 72ND AVE EAST SARASOTA, FL 34243 | | Mailing Address 4116 72ND AVE EAST SARASOTA, FL 34243 | |
| 2. Principal Place of Business - No P.O. Box # 701 Foggy Morn Lane Suite, Apt. #, etc. | | 3. Mailing Address P.O. Box 1605 Suite, Apt. #, etc. | |
| City & State Bradenton, FL Zip 34212 | | City & State TALLEHAST, FL Zip 34270-1605 | |
| 4. FEI Number 01-0772445 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent WEBER, ROBERT A JR 4116 72ND AVE EAST SARASOTA, FL 34243 | | 7. Name and Address of New Registered Agent Name Weber, Robert A Jr Street Address (P.O. Box Number is Not Acceptable) 701 Foggy Morn Lane City Bradenton State FL Zip Code 34212 | |
| 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Robert A. Weber Jr</u> DATE 3/28/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE D <input type="checkbox"/> Delete NAME WEBER, ROBERT A JR STREET ADDRESS 4116 72ND AVE EAST CITY-STATE-ZIP SARASOTA, FL 34243 | TITLE P Weber, Robert A Jr <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME 701 Foggy Morn Lane STREET ADDRESS BRADENTON, FL 34212 CITY-STATE-ZIP | TITLE NAME STREET ADDRESS CITY-STATE-ZIP | TITLE NAME STREET ADDRESS CITY-STATE-ZIP |
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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered. | | | |
| SIGNATURE: <u>Robert A. Weber Jr</u> DATE 3/28/08 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> | | | |