

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000071600

Entity Name: BRIAN C. QUIMBY, INC.

FILED  
Apr 11, 2006  
Secretary of State

## Current Principal Place of Business:

3904 MEADOWCREEK DR  
SARASOTA, FL 34232

## New Principal Place of Business:

28602 100TH DR E  
MYAKKA CITY, FL 34251

## Current Mailing Address:

3904 MEADOWCREEK DR  
SARASOTA, FL 34232

## New Mailing Address:

28602 100TH DR E  
MYAKKA CITY, FL 34251

FEI Number: 56-2374310

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

QUIMBY, BRIAN  
3904 MEADOWCREEK DR  
SARASOTA, FL 34232 US

## Name and Address of New Registered Agent:

QUIMBY, BRIAN  
28602 100TH DR E  
MYAKKA CITY, FL 34251 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: BRIAN QUIMBY

04/11/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: QRIMBY, BRIAN  
Address: 3904 MEADOW CREEK DR  
City-St-Zip: SARASOTA, FL 34233

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: QRIMBY, BRIAN  
Address: 28602 100TH DR E  
City-St-Zip: MYAKKA CITY, FL 34251

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: BRIAN QUIMBY

P

04/11/2006

Electronic Signature of Signing Officer or Director

Date