


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 06, 2004 8:00 am**  
**Secretary of State**

05-04-2004 90117 027 \*\*\*150.00

<b>DOCUMENT # P03000077293</b> 1. Entity Name <b>QUICK ADD BOARD, INC.</b>																											
Principal Place of Business <b>6220 SOUTH ORANGE BLOSSOM TRAIL SUITE 511B ORLANDO, FL 32809</b>		Mailing Address <b>6220 SOUTH ORANGE BLOSSOM TRAIL SUITE 511B ORLANDO, FL 32809</b>																									
2. Principal Place of Business <b>1225 S. Pine Ave</b> Suite, Apt. #, etc.		3. Mailing Address <b>1225 S. Pine Ave</b> Suite, Apt. #, etc.																									
City & State <b>Fort Pierce FL</b>		City & State <b>Fort Pierce FL</b>																									
Zip <b>33843</b>		Country <b>USA</b>																									
4. FEI Number		<input checked="" type="checkbox"/> Applied For Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>																									
6. Name and Address of Current Registered Agent  <b>CAMPBELL, JOHN M 6220 SOUTH ORANGE BLOSSOM-TRAIL SUITE 511B ORLANDO, FL 32809</b>		7. Name and Address of New Registered Agent Name <b>Richard Churchwell</b> Street Address (P.O. Box Number is Not Acceptable) <b>1225 S. Pine Ave</b> City <b>Fort Pierce FL</b> Zip Code <b>33843</b>																									
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 <b>Richard Churchwell</b> <b>Richard Churchwell</b> <b>5/3/04</b> <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when resigning)</small>																											
<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:70%;"> <b>President / Director Richard Churchwell 1225 S. Pine Ave Fort Pierce, FL 33843</b> <input type="checkbox"/> Delete         </td> </tr> <tr><td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td><input type="checkbox"/> Delete</td></tr> <tr><td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td><input type="checkbox"/> Delete</td></tr> <tr><td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td><input type="checkbox"/> Delete</td></tr> <tr><td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td><input type="checkbox"/> Delete</td></tr> <tr><td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td><input type="checkbox"/> Delete</td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>President / Director Richard Churchwell 1225 S. Pine Ave Fort Pierce, FL 33843</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:70%;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition         </td> </tr> <tr><td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> <tr><td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> <tr><td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> <tr><td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> <tr><td>TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																											
SIGNATURE: <b>Richard Churchwell</b> <b>Richard Churchwell</b> <b>5/3/04</b> <b>407-240-4121</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																											

66429446



05032004 Chg-P CR2E034 (10/03)

*Attachment*

*66429446*

June 25, 2004

Florida Department of State:  
PO Box 6237  
Tallahassee FL 32314

RE: Quick Add Board, Inc. P02000077293

Ladies and Gentlemen:

Pursuant to our telephone conversation this afternoon, I am returning the enclosed corrected form to your office. I note that your letter said that I had thirty days to submit the correction, but the form says it is not due until September 8, 2004 and even though the letter is dated May 19, 2004, it was postmarked June 18, 2004, making it impossible for me to return it within 30 days of May 19.

Thank you for your cooperation in this matter. I understand from your letter that you retained the \$150.00 check as it was not enclosed with your letter.

Very truly yours,

*Richard Churchwell*

Richard Churchwell  
1225 S. Pine Avenue  
Frostproof FL 32843