2004 FOR PROFIT CORPORATION

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## Apr 19, 2004 8:00 am Secretary of State ANNUAL REPORT (AR). DOCUMENT # P03000152382 04-07-2004 90022 034 \*\*\*150 00 CHARLES QUICK CONSTRUCTION INC Principal Place of Business Mailing Address 2035 GREEN STREET SOUTH DAYTONA FL 32119 P.O. BOX 214322 SOUTH DAYTONA FL 32121 2. Principal Place of Business Mailing Address 313 WEllman WEll man Suite, Apt. #, etc. CR2E034 (11/03) ORAnge Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 0 7. Name and Address of New Registered Agent QUICK, CHARLES Street Address (P.O. Box Number is Not Acceptable) 2035 GREEN STREET SOUTH DAYTONA, FL FL 32119 City Zip Code 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. 1-04 SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Addition TITLE □ Delete TITLE ☐ Change QUICK, CHARLES NAME NAME STREET ADDRESS 2035 GREEN STREET STREET ADDRESS SOUTH DAYTONA FL 32119 CITY-ST-ZIP CITY-ST-ZIP VP Delete ☐ Change ☐ Addition TITLE QUICK, CHARLES MAMS NAME 2035 GREEN STREET STREET ADDRESS STREET ADORESS SOUTH DAYTONA FL 32119 CITY-ST-7P CITY-ST-7IP ☐ Change Delete ■ Addition TITLE TITLE NÄME QUICK, CHARLES NAME STREET ADDRESS STREET ADORESS 2035 GREEN STREET SOUTH DAYTONA FL. 321.19. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Chance TITLE QUICK, CHARLES 2035 GREEN STREET STREET ADDRESS STREET ADDRESS SOUTH DAYTONA FL 32119 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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.

**FILED**