

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000157982

Entity Name: QUALITYHUB, INC.

**FILED**  
**Feb 19, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5151 DORWIN PLACE  
ORLANDO, FL 32814

**New Principal Place of Business:**

**Current Mailing Address:**

5151 DORWIN PLACE  
ORLANDO, FL 32814

**New Mailing Address:**

FEI Number: 20-0561319

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WELLS, ROBERT W MR  
124 GLENCULLEN CIRCLE  
JUPITER, FL 33458 US

**Name and Address of New Registered Agent:**

WELLS, CHERYLL J MRS.  
5151 DORWIN PLACE  
ORLANDO, FL 32814 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: CHERYLL J. WELLS

02/19/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: WELLS, TIMOTHY R MR  
Address: 5151 DORWIN PLACE  
City-St-Zip: ORLANDO, FL 32814

Title: DIR  
Name: WELLS, CHERYLL J MRS  
Address: 5151 DORWIN PLACE  
City-St-Zip: ORLANDO, FL 32814

Title: DIR  
Name: WELLS, CHERYLL J MRS.  
Address: 18400 AZALEA DRIVE  
City-St-Zip: DERWOOD, MD 20855

I hereby 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 all other like empowered.

SIGNATURE: CHERYLL J. WELLS

DIR

02/19/2012

Electronic Signature of Signing Officer or Director

Date