

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000004248

FILED
Sep 13, 2006
Secretary of State

Entity Name: STEVEN QUINLIVAN ENTERPRISES, INC.

Current Principal Place of Business:

3102 EDGEWOOD DRIVE NE
PALM BAY, FL 32905

New Principal Place of Business:

Current Mailing Address:

3102 EDGEWOOD DRIVE NE
PALM BAY, FL 32905

New Mailing Address:

FEI Number: 20-0566021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUINLIVAN, STEVEN
3102 DGEWOOD DR NE
PALM BAY, FL 32905 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: QUINLIVAN, STEVEN
Address: 3102 EDGEWOOD DRIVE NE
City-St-Zip: PALM BAY, FL 32905

Title: DT () Delete
Name: QUINLIVAN, PATRICIA
Address: 3102 EDGEWOOD DRIVE NE
City-St-Zip: PALM BAY, FL 32905

Title: VPOP () Delete
Name: LEE, TERRY
Address: 3135 EDGEWOOD DRIVE NE
City-St-Zip: PALM BAY, FL 32905 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: 2VP () Change (X) Addition
Name: LANHAM, MICHAEL R
Address: 3102 EDGEWOOD DRIVE NE
City-St-Zip: PALM BAY, FL 32905

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: STEVEN QUINLIVAN

DPS

09/13/2006

Electronic Signature of Signing Officer or Director

Date