2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000031630

Entity Name: QUICK CLOSE SOLUTIONS INC.

FILED Mar 22, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5880 LISKA DRIVE 10005 ROSEWOOD GLEN LANE JACKSONVILLE, FL 32244 JACKSONVILLE, FL 32219

Current Mailing Address: New Mailing Address:

5880 LISKA DRIVE 10005 ROSEWOOD GLEN LANE JACKSONVILLE, FL 32244 JACKSONVILLE, FL 32219

FEI Number: 42-1617908 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BROWN, SHAMEKA J
5880 LISKA DRIVE
JACKSONVILLE, FL 32244 US
BROWN, SHAMEKA J
10005 ROSEWOOD GLEN LANE
JACKSONVILLE, FL 32219 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: 03/22/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 BROWN, SHAMEKA J
 Name:
 BROWN, SHAMEKA J

 Address:
 5880 LISKA DRIVE
 Address:
 10005 ROSEWOOD GLEN LANE

 City-St-Zip:
 JACKSONVILLE, FL 32244
 City-St-Zip:
 JACKSONVILLE, FL 32219

Title: V () Delete Title: V (X) Change () Addition

Name: BROWN, TIMOTHY R Name: BROWN, TIMOTHY R

 Address:
 5880 LISKA DRIVE
 Address:
 10005 ROSEWOOD GLEN LANE

 City-St-Zip:
 JACKSONVILLE, FL 32244
 City-St-Zip:
 JACKSONVILLE, FL 32219

Title: T () Delete Title: T (X) Change () Addition

Name: BROWN, SHAMEKA J Name: BROWN, SHAMEKA J Address: 5880 LISKA DRIVE Address: 10005 ROSEWOOD GLEN LANE

Address: 5880 LISKA DRIVE Address: 10005 ROSEWOOD GLEN LANE
City-St-Zip: JACKSONVILLE, FL 32244 City-St-Zip: JACKSONVILLE, FL 32219

Title: () Delete Title: (X) Change () Addition BROWN, TIMOTHY R BROWN, TIMOTHY R Name: Name: Address: 5880 LISKA DRIVE Address: 10005 ROSEWOOD GLEN LANE City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32244 JACKSONVILLE, FL 32219

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SHAMEKA J BROWN P 03/22/2005