

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

03-21-2005 90104 046 ***150.00

DOCUMENT # P040000597.14					
1. Entity Name QUALITY GARAGE DOORS, INC.					
Principal Place of Business 1065 NW 102ND STREET OKEECHOBEE, FL 34972			Mailing Address 1065 NW 102ND STREET OKEECHOBEE, FL 34972		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
5. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
WATFORD, LEE 1065 NW 102ND STREET OKEECHOBEE, FL 34972				Name	
				Street Address (P.O. Box Number is Not Acceptable) 16550 NW 144TH AVE	
				City OKEECHOBEE FL Zip Code 34972	
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 <u>Lee Watford</u> DATE <u>3-14-05</u>					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE ☐ Delete NAME WATFORD, LEE STREET ADDRESS 1065 NW 102ND STREET CITY-ST-ZIP OKEECHOBEE, FL 34972			☒ Change ☐ Addition TITLE 16550 NW 144TH AVE NAME OKEECHOBEE FL 34972 STREET ADDRESS CITY-ST-ZIP		
TITLE ☐ Delete NAME WATFORD, LEE STREET ADDRESS 1065 NW 102ND STREET CITY-ST-ZIP OKEECHOBEE, FL 34972			☒ Change ☐ Addition TITLE 16550 NW 144TH AVE NAME OKEECHOBEE FL 34972 STREET ADDRESS CITY-ST-ZIP		
TITLE ☐ Delete NAME Shannon Watford STREET ADDRESS 16550 NW 144TH AVE CITY-ST-ZIP OKEECHOBEE FL 34972			☐ Change ☒ Addition TITLE Treasurer NAME Shannon Watford STREET ADDRESS 16550 NW 144TH AVE CITY-ST-ZIP OKEECHOBEE FL 34972		
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE ☐ Delete NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 <u>Lee Watford</u> DATE <u>3-14-05</u> (883) 763-2215					