

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-14-2006 90129 050 ***150.00

DOCUMENT # P04000160766

1. Entity Name
QUALITY PROPERTY SERVICES INC.



Principal Place of Business
**560 VENETIAN WAY
MERRITT ISLAND, FL 32953 US**

Mailing Address
**560 VENETIAN WAY
MERRITT ISLAND, FL 32953 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03132006 Chg-P CR2E034 (11/05)

4. FEI Number
20-1984500

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**RADLEIN, LISA J
2635 RAINTREE LAKE CIRCLE
MERRITT ISLAND, FL 32953**

7. Name and Address of New Registered Agent

Name
Salber, Terry W.
Street Address (P.O. Box Number is Not Acceptable)
560 Venetian Way
City
Merritt Island FL Zip Code
32953

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

Terry W. Salber

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/10/06

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **SALBER, TERRY W**
STREET ADDRESS **560 VENETIAN WAY**
CITY-ST-ZIP **MERRITT ISLAND, FL 32953**

TITLE **VP** ☒ Delete
NAME **RADLEIN, KEVIN M**
STREET ADDRESS **2635 RAINTREE LAKE CIRCLE**
CITY-ST-ZIP **MERRITT ISLAND, FL 32953**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Vice President** ☐ Change ☒ Addition
NAME **Salber, Tracie**
STREET ADDRESS **560 Venetian Way**
CITY-ST-ZIP **Merritt Island, FL 32953** ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Terry W. Salber

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TERRY W. SALBER

4/10/06

Date

324 591 7827

Daytime Phone #