

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000003052

Entity Name: QUALITY HAY SALES, INC.

FILED  
Jan 20, 2009  
Secretary of State

## Current Principal Place of Business:

2450 N.E. 200TH. AVENUE  
WILLISTON, FL 32696

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 686  
WILLISTON, FL 326960686

## New Mailing Address:

FEI Number: 20-2150238

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VINA, JESUS S  
2450 NE 200TH AVE  
WILLISTON, FL 32696 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: VINA, JESUS S  
Address: 2450 NE 200TH AVE  
City-St-Zip: WILLISTON, FL 32696

Title: SD ( ) Delete  
Name: VINA, DEISREE M  
Address: 941 SW 111TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D ( ) Delete  
Name: VINA, ELIZABETH  
Address: 4946 S.W. 45TH. CIRCLE  
City-St-Zip: OCALA, FL 34474

Title: D ( ) Delete  
Name: VINA, SHARI G  
Address: 19195 S.W. 90TH. LANE ROAD  
City-St-Zip: DUNNELLON, FL 34432

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change ( ) Addition  
Name: VINA, DESIREE M  
Address: 941 SW 111TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33025

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

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

I hereby certify that the information supplied with this filing does not qualify 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: JESUS S VINA

PTD

01/20/2009

Electronic Signature of Signing Officer or Director

Date