

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000070809

FILED  
Aug 09, 2006  
Secretary of State

Entity Name: PHILLIP QUALITY INSTALLATIONS, INC.

## Current Principal Place of Business:

7800 POINT MEADOWS DRIVE, UNIT 836  
JACKSONVILLE, FL 32256

## New Principal Place of Business:

5 ARBOR CLUB DR.  
319  
PONTE VEDRA, FL 32082

## Current Mailing Address:

7800 POINT MEADOWS DRIVE, UNIT 836  
JACKSONVILLE, FL 32256

## New Mailing Address:

5 ARBOR CLUB DR.  
319  
PONTE VEDRA, FL 32082

FEI Number: 20-2847620

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PHILLIP, CHRISTOPHER M  
7800 POINT MEADOWS DRIVE, UNIT 836  
JACKSONVILLE, FL 32256 US

## Name and Address of New Registered Agent:

PHILLIP, CHRISTOPHER M  
5 ARBOR CLUB DR.  
319  
PONTE VEDRA, FL 32082 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:

08/09/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PDS ( ) Delete  
Name: PHILLIP, CHRISTOPHER M  
Address: 7800 POINT MEADOWS DRIVE, UNIT 836  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VPT ( ) Delete  
Name: GOFFIN, KELLI A  
Address: 7917 MOUNT RANIER DRIVE  
City-St-Zip: JACKSONVILLE, FL 32256

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change ( ) Addition  
Name: PHILLIP, CHRISTOPHER M  
Address: 5 ARBOR CLUB DR. #319  
City-St-Zip: PONTE VEDRA, FL 32082

Title: VPT (X) Change ( ) Addition  
Name: PHILLIP, KELLI A  
Address: 5 ARBOR CLUB DR. #319  
City-St-Zip: PONTE VEDRA, FL 32082

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: CHRISTOPHER PHILLIP

PDS

08/09/2006

Electronic Signature of Signing Officer or Director

Date