2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# P06000029612

Entity Name: QUALITY PUMPS CORPORATION

Current Principal Place of Business:

8270 SILVER BIRCH WAY
LEHIGH ACRES, FL 33971

New Principal Place of Business:

Current Mailing Address:

4915 RATTLESNAKE-HAMMOCK RD
118
NAPLES, FL 34113

New Mailing Address:

FEI Number: 20-4391644 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEHMAN, WILLIAM
1500 N. BOSWORTH AVENUE
CHICAGO, IL, FL 60622 US

Name and Address of New Registered Agent:

LEHMAN, WILLIAM
8270 SILVER BIRCH WAY
LEHIGH ACRES, FL 33971 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: 04/15/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LEHMAN, WILLIAM
Address: 1500 N. BOSWORTH AVENUE
City-St-Zip: CHICAGO, IL 60622

Title: VP ( ) Delete
Name: BLAIR II, HOWARD T VP
Address: 8270 SILVER BIRCH WAY
City-St-Zip: LEHIGH ACRES, FL 33971

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WILLIAM LEHMAN OFF 04/15/2009
Electronic Signature of Signing Officer or Director — Date