2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 31, 2007
Secretary of State

DOCUMENT# P06000076690

Entity Name: RESULTS QUICK, INC.

Current Principal Place of Business:

108 KNOTTY PINE TRAIL
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

108 KNOTTY PINE TRAIL
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 20-5003399 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMALLBIZ AGENTS, LLC
4244 W. TENNESSEE STREET
#185
TALLAHASSEE, FL 32304 US

Name and Address of New Registered Agent:

INCORP SERVICES INC
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33471 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: INCORP SERVICES INC 08/31/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: KANN, LAWRENCE F SR.
Address: 108 KNOTTY PINE TRAIL
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP ( ) Delete
Name: KANN, LAWRENCE F JR.
Address: 108 KNOTTY PINE TRAIL
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: SEC ( ) Delete
Name: KELLY, JULIE
Address: 3 DEGGS CIRCLE
City-St-Zip: NEW TOWN SQUARE, PA 19072

Title: TREA ( ) Delete
Name: HENDRICKSON, DONNA
Address: 506 GUNBY CIRCLE
City-St-Zip: ST. AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: TREA (X) Change ( ) Addition
Name: FARMER, KAREN
Address: 11956 HARBOUR COVE LANE SOUTH
City-St-Zip: JACKSONVILLE, FL 32225

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: LAWRENCE F KANN PRES 08/31/2007
Electronic Signature of Signing Officer or Director Date