

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000157522

FILED
Apr 30, 2009
Secretary of State

Entity Name: SCHMID QUALITY HOMES, INC.

Current Principal Place of Business:

1230 OAKLEY SEAVER DR SUITE 200
CLERMONT, FL 34711

New Principal Place of Business:

1655 EAST HIGHWAY 50
300
CLERMONT, FL 34711

Current Mailing Address:

1230 OAKLEY SEAVER DR SUITE 200
CLERMONT, FL 34711

New Mailing Address:

1655 EAST HIGHWAY 50
300
CLERMONT, FL 34711

FEI Number: 20-8123982

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHMID, JOHN
1230 OAKLEY SEAVER DR SUITE 200
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

SCHMID, JOHN
1655 EAST HIGHWAY 50
300
CLERMONT, FL 34711 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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHMID, JOHN
Address: 1230 OAKLEY SEAVER DR SUITE 200
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: SCHMID, GEORGE
Address: 1230 OAKLEY SEAVER DR SUITE 200
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: KING, WAYNE
Address: 1230 OAKLEY SEAVER DR SUITE 200
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCHMID, JOHN
Address: 1655 EAST HIGHWAY 50 SUITE 300
City-St-Zip: CLERMONT, FL 34711

Title: D (X) Change () Addition
Name: SCHMID, GEORGE
Address: 1655 EAST HIGHWAY 50 SUITE 300
City-St-Zip: CLERMONT, FL 34711

Title: D (X) Change () Addition
Name: KING, WAYNE
Address: 1655 EAST HIGHWAY 50 SUITE 300
City-St-Zip: CLERMONT, FL 34711

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: JOHN SCHMID

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date