

ANNUAL REPORT

DOCUMENT # P24577

1. Entity Name

MALONE'S QUALITY SERVICE, INC.



FILED
Apr 29, 2004 08:00 AM
Secretary of State

Principal Place of Business

 22780 N US HWY 441
 MICANOPY, FL 32667 US

Mailing Address

 22780 N US HWY 441
 MICANOPY, FL 32667 US


01072004

No Chg-P

CR2E034 (10/03)

4. FEI Number

59-2917346

Applied For

Not Applicable

5. Certificate of Status Desired ☐
\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

 MALONE, CLIFTON TRUMAN
 22780 NORTH US HWY 441
 MICANOPY, FL 32667

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Clifton T. Malone CLIFTON T. MALONE 4-27-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

 FILE NOW!!! FEE IS \$150.00
 After May 1, 2004 Fee will be \$550.00

 9. Election Campaign Financing
 Trust Fund Contribution. ☐
\$5.00 May Be
 Added to Fees

10. OFFICERS AND DIRECTORS

 TITLE PTD
 NAME MALONE, CLIFTON T.
 STREET ADDRESS 22780 N US HWY 441
 CITY-ST-ZIP MICANOPY, FL 32667

 TITLE VSD
 NAME MALONE, TIMOTHY WAYNE
 STREET ADDRESS 905 BRANTLEY DR
 CITY-ST-ZIP LONGWOOD, FL

 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

 U00000138033
 04/29/04-80065-009 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Clifton T. Malone