

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000056227

Entity Name: QUALITY WHOLESALE, INC.

**FILED**  
**Mar 09, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5686 JASON LEE PL  
SARASOTA, FL 34233 US

**New Principal Place of Business:**

**Current Mailing Address:**

8834 MISTY CREEK DR  
SARASOTA, FL 34241 US

**New Mailing Address:**

FEI Number: 65-0434061

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOLDEN, WILLIAM R  
8834 MISTY CREEK DR  
SARASOTA, FL 34241 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: HOLDEN, JUDITH A  
Address: 8834 MISTY CREEK DRIVE  
City-St-Zip: SARASOTA, FL 34241

Title: VP  
Name: HOLDEN, JUDITH A  
Address: 8834 MISTY CREEK DRIVE  
City-St-Zip: SARASOTA, FL 34241

I hereby 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 all other like empowered.

SIGNATURE: JUDITH A. HOLDEN

PRES

03/09/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date