2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2009
Secretary of State

DOCUMENT# P94000041894

Entity Name: QUALITY PLYWOOD SPECIALTIES, INC.

Current Principal Place of Business:

4500-110 AVE N
CLEARWATER, FL 33762 US

New Principal Place of Business:

Current Mailing Address:

4500-110 AVE N
CLEARWATER, FL 33762 US

New Mailing Address:

FEI Number: 59-3250367 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JANKOWSKI, MICHAEL A
4500-110 AVE N
CLEARWATER, FL 33762 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: JANKOWSKI, MICHAEL A
Address: 4500-110 AVE N
City-St-Zip: CLEARWATER, FL 33762

Title: D ( ) Delete
Name: JANKOWSKI, CONNIE J
Address: P.O. BOX 741
City-St-Zip: CRYSTAL BEACH, FL 34681

Title: VP ( ) Delete
Name: JANKOWSKI, CHRISTOPHER
Address: 3188 YARNIOUTH AVE
City-St-Zip: DELTONA, FL 32738

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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 ( ) Change (X) Addition
Name: JANKOWSKI, THOMAS G TREASUR
Address: 641 MAYO ST. NO., P.O.BOX 928
City-St-Zip: CRYSTAL BEACH,, FL 34681 US

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: MICHAEL A. JANKOWSKI PRES 02/20/2009

Electronic Signature of Signing Officer or Director Date