

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000067814

FILED
Apr 20, 2004
Secretary of State

Entity Name: QUALITY MANUFACTURING COMPANY, INC.

Current Principal Place of Business:

286 EAST PALMETTO AVENUE
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

286 EAST PALMETTO AVENUE
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 59-3274653

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOHRMANN, GEORGE
286 EAST PALMETTO AVENUE
LONGWOOD, FL 32750

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: BOHRMANN, GEORGE
Address: 169 POST & RAIL ROAD
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: BOHRMANN, BONITA
Address: 169 POST & RAIL ROAD
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: BOHRMANN, TODD
Address: 4212 RED OAK DRIVE
City-St-Zip: TALLAHASSEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: BOHRMANN, BONITA C
Address: 169 POST & RAIL ROAD
City-St-Zip: LONGWOOD, FL 32750

Title: D (X) Change () Addition
Name: BOHRMANN, TODD F
Address: 4212 RED OAK DRIVE
City-St-Zip: TALLAHASSEE, FL 32311

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GEORGE E. BOHRMANN

OWNE

04/20/2004

Electronic Signature of Signing Officer or Director

_____ Date