

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000080125

Entity Name: QUALITY MANAGEMENT EXCHANGE, INC.

FILED
Jan 17, 2009
Secretary of State

Current Principal Place of Business:

3333 S ATLANTIC AVE
STE 1101
DAYTONA BEACH SHORES, FL 32118 US

New Principal Place of Business:

Current Mailing Address:

P/O/ BOX 219204
PORT ORANGE, FL 32129 US

New Mailing Address:

P.O. BOX 219204
PORT ORANGE, FL 32129 US

FEI Number: 59-3277021

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: P () Delete

Name: ROBISON, JAMES D

Address: 3333 S ATLANTIC AVE, STE 1101

City-St-Zip: DAYTONA BEACH, FL 32118

Title: VP () Delete

Name: ROBISON, AMY S

Address: 3333 S ATLANTIC AVE., STE. 1101

City-St-Zip: DAYTONA BEACH, FL 32118

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition

Name:

Address:

City-St-Zip:

Title: () Change () Addition

Name:

Address:

City-St-Zip:

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: JAMES D. ROBISON

CEO

01/17/2009

Electronic Signature of Signing Officer or Director

Date