

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 26 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000082850

1. Corporation Name  
QLC OF KISSIMMEE, INC

Principal Place of Business: 1600 WEST COLONIAL DRIVE ORLANDO, FL 32808  
Mailing Address: 1600 WEST COLONIAL DRIVE ORLANDO, FL 32808

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
10-30-95

2. Principal Place of Business 1 4940 EMERSON ST. Suite, Apt. #, etc. 2 City & State 3 JACKSONVILLE, FL Zip 4 32207	2a. Mailing Address 26 4940 EMERSON ST Suite, Apt. #, etc. 27 City & State 28 JACKSONVILLE, FL Zip 29 32207	Country 25 USA 30 USA	4. FEI Number 59-3346137	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>			\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				

9. Name and Address of Current Registered Agent  
HILLMAN, RANDY ESQ.  
203 EAST HILL CREST STREET  
ORLANDO, FL 32801

10. Name and Address of New Registered Agent  
81 Name ULERIE, MARK A.  
82 Street Address (P.O. Box Number is Not Acceptable)  
83 13097 HARBORTON DR  
84 City JACKSONVILLE FL 85 Zip Code 32224

\*1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input checked="" type="checkbox"/> DELETE	1.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME SCALETTA, MICHAEL E		1.2 NAME ULERIE, MARK A	
STREET ADDRESS 1600 WEST COLONIAL DRIVE		1.3 STREET ADDRESS 13097 HARBORTON DR	
CITY-ST-ZIP ORLANDO, FL 32808		1.4 CITY-ST-ZIP JACKSONVILLE, FL 32224	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	100002538061
STREET ADDRESS		6.3 STREET ADDRESS	-05/28/98--01012--020
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***150.00

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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: \_\_\_\_\_ DATE: 4/30/98 904.398.2020