

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000097243

Entity Name: SUZY-Q ENTERPRISES, INC.

FILED
Mar 17, 2009
Secretary of State

Current Principal Place of Business:

290 SW BROAD ST.
SOUTHERN PINES, NC 28387 US

New Principal Place of Business:

Current Mailing Address:

6 CANAL LN
WHISPERING PINES, NC 28387 US

New Mailing Address:

1042 BELLASOL WAY
202
APOLLO BEACH, FL 33572 US

FEI Number: 59-3354154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRAWFORD, JOHN R
225 WATER STREET
SUITE 900
JACKSONVILLE, FL 32202 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: PCEO () Delete
Name: ABDIAN, RUTHELIA Q
Address: 6436 SUNSET BAY CIRCLE
City-St-Zip: APOLLO BEACH, FL 33572

Title: V () Delete
Name: ABDIAN, CHARLES G
Address: 6436 SUNSET BAY CIRCLE
City-St-Zip: APOLLO BEACH, FL 33572

Title: S () Delete
Name: YOUNG, LEE ANNE
Address: 290 SW BROAD ST
City-St-Zip: SOUTHERN PINES, NC 28387

Title: T () Delete
Name: SCALES, DIANE
Address: 20 CARDINAL DRIVE
City-St-Zip: JACKSON SPRINGS, NC 27281

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: HILL, PEGGY
Address: 14063 U.S. HWY 15-501 S.
City-St-Zip: ABERDEEN, NC 28315

Title: T (X) Change () Addition
Name: CREWS, MICHELLE
Address: 150 E. INDIANA AVE.
City-St-Zip: SOUTHERN PINES, NC 28387

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: CHARLES G. ABDIAN

V

03/17/2009

Electronic Signature of Signing Officer or Director

_____ Date