FILED

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATUR€

Jul 09, 2002 8:00 am DOCUMENT # P96000015232 **Secretary of State** 1. Entity Name 07-09-2002 90026 011 ***150.00 AFFORDABLE QUALITY CARE, INC. Principal Place of Business Mailing Address 3489 PINE STREET 3489 PINE STREET PALM HARBOR FL 34683 PALM HARBOR FL 34683 2. Principal Place of Busines PINE DA 3489 DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For 59-3357507 UNEDIN DUNE CIN Not Applicable Country - PIN & 1/A S \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WALLS, JAMES C JR. Street Address (P.O. Box Number is Not Acceptable) 3489 PINE STREET PALM HARBOR FL 34683 FL 34698 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered ag SIGNATURE ame of registered agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition NAME WALLS, JAMES C JR. NAME 3489 PINE STREET STREET ADDRESS STREET ADDRESS PALM HARBOR FL 34683-CITY-ST-ZIP CITY-ST-ZIP DUNEdIN, FL TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME 3469R STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-7IP 13. 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 report or supplemental 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 11 or Block 12 if the empowered of the corporation o

AFFORDABLE QUALITY CARE, INC 3489 Pine Street Dunedin, Florida 34698

(727)785-7344

To Whom It May Concem:

Today, July 2,2002, I spoke with one of your representatives concerning the increase in filing Corporation fees. It seemed excessive-that-last-year the fee of \$150.00 increased to \$550.00 for this year. Your rep indicated that it was penalty that increased the costs.

Recently, the Post Office changed the city I lived in from Palm Harbor to Dunedin along with a different Zip code. I explained this to your rep and informed her that I did not receive the business report package for the year 2002. This was not the first time that mail has not come to me due to the change of City and Zip Code.

The rep then told me to send a letter accordingly and enclose the cost of the original filing fee without the penalty.

Thank you for your time and consideration.

Sincerely.

Jim Walls

Pres. AQC