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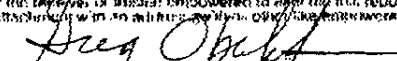
Greg Oberhofer

841-778-2580

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2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000012780 1. Filing Name: QUALITY LAND DEVELOPMENT, INC.				Secretary of State	
Principal Place of Business 5500-A MARINA DRIVE HOLMES BEACH, FL 34217		Mailing Address P.O. BOX 1732 HOLMES BEACH, FL 34218			
DO NOT WRITE IN THIS SPACE				04152004 No Chg-P CDT004 (10/03)	
				4. FCI Number 65-0730537	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent OBERHOFFER, GREG 5500-A MARINA DRIVE HOLMES BEACH, FL 34217				DO NOT WRITE IN THIS SPACE	
7. The person named hereby certifies the 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 the person named.					
SIGNATURE _____					
8. Filing Campaign Financing Trust First Contribution ☐ \$5.00 May Be Added to Fees					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00					
TO: PRESIDENT AND DIRECTORS					
PRESIDENT NAME STREET ADDRESS CITY OF FL		P OBERHOFFER, GREGORY E. 5909 FI OTILLA HOLMES BEACH, FL 34217			
VICE PRESIDENT NAME STREET ADDRESS CITY OF FL		S ALBERT, LARRY 711 GLADIOLUS ANNA MARIA, FL 34216			
VICE PRESIDENT NAME STREET ADDRESS CITY OF FL		VP ALBERT, ALAN L. 711 GLADIOLUS ANNA MARIA, FL 34216			
VICE PRESIDENT NAME STREET ADDRESS CITY OF FL		T ALBERT, STEVEN W. 711 GLADIOLUS ANNA MARIA, FL 34216			
VICE PRESIDENT NAME STREET ADDRESS CITY OF FL					
VICE PRESIDENT NAME STREET ADDRESS CITY OF FL					
12. I hereby certify that the information provided with this filing does not qualify for the exemption stated in Section 111.07(3)(c), 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 I make under oath. But I am an officer or director of the corporation or this employee or trustee empowered to execute this report as required by Chapter 407, Florida Statutes and that my name appears in Block 10 or Block 11.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					