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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortharp

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000015536 (0)

QUALIT	TY BUILDER SERVICES, IN	C.		F and richael and really energy point pages pages are selected and s	<u> </u>
Principal Plac	e of Rusiness	Mailing Address			#
4110 SOUTH FLORIDA AVENUE		4110 SOUTH FLORIDA A	/FNIIE		
		LAKELAND FL 33813	PENOL	DO NOT WRITE IN T	LIIC CDAOC
				3. Date Incorporated or Qualified	113 SPACE
				02/13/1997	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Nymber	Applied For
21		26		59-3457229	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	g, Name and Address of Curre	nt Hegistered Agent	81 Name	10. Name and Address of New Registe	red Agent
TODO, M A					<u>, ,</u>
4110 SOUTH FLORIDA AVENUE LAKELAND FL 33813		82 Street Add	dress (P.O. Box Number is Not Acceptable)		
- <del></del>	ALEMAN I C 00019		83		
			84 City	······································	<b>85</b> Zip Code
				,	F <b>L</b> │ │
<ol> <li>Pursuant office or r</li> </ol>	to the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607.1508, Florida <b>Stat</b> ute e of Florida. Such change was a	es, the above-named con authorized by the corpora	rporation submits this statement for the purpor ation's board of directors. I hereby accept the	se of changing its registered appointment as registered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, Flo	orida Statutes.	,	
SIGNATURE	Signature, typed or printed name of registered ag	ent and title il applicable (NOTE	E: Registered Agent signature requ	uired when reinstating) DA	TE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	STEPHENS, DONALD K		1.2 NAME		
STREET ADDRESS	4110 SOUTH FLORIDA AVEN	IUE	1.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL 33813	DELETE	1.4 CITY-ST-ZIP		Change Addition
TITLE NAME	D TODD, M A		2.1 TITLE 2.2 NAME		Change C Admiton
STREET ADDRESS	4110 SOUTH FLORIDA AVEN	n IF	2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKELAND FL 33813		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	4.1 TITLE 4. 2 NAME		
NAME STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY+ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		The see	5.4 CITY - ST - ZIP		T 64
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

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 infoicated 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.

**FILED** 

Feb 18 1998 8:00am

Secretary of State