2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000030206

Entity Name: QUALITY FENCE CONTRACTORS INC.

FILED Oct 13, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

857 SW SOUTH MACEDO BLVD PORT SAINT LUCIE, FL 34983 US

Current Mailing Address: New Mailing Address:

857 SW SOUTH MACEDO BLVD PORT SAINT LUCIE, FL 34983 US

FEI Number: 65-0742156 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

KIERSTEAD, JAMES J POTTER, JUDITH A 2101 SE HEATHWOOD CIRCLE 6456 NW FAYE ST.

PORT SAINT LUCIE, FL 34986 US PORT SAINT LUCIE, FL 34952 US

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: JUDITH A. POTTER 10/13/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: **PRFS** (X) Change () Addition

KIERSTEAD, JAMES J Name: Name: POTTER, JUDITH A 6456 NW FAYE STREET 2101 SE HEATHWOOD CIRCLE Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34986 City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: () Delete Title: ۷P () Change (X) Addition

Name: Name: KIERSTEAD, JAMES J 6456 NW FAYE ST. Address: Address: PORT SAINT LUCIE, FL 34986 City-St-Zip: City-St-Zip:

Title: Title: () Delete SEC () Change (X) Addition Name: POTTER, RICHARD D Name:

2101 SE HEATHWOOD CIRCLE Address: Address: City-St-Zip: City-St-Zip: PORT SAINT LUCIE, FL 34952

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: JUDITH A. POTTER **PRES** 10/13/2009