

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

FILED

Jun 16 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortonham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000042794 (2)
1. Corporation Name
QUALITY FIRST STUCCO, INC.

Principal Place of Business
1611 STATE ROAD 15A #4
DELAND FL 32724

Mailing Address
1611 STATE ROAD 15A #4
DELAND FL 32724



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/14/1997	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-3446030		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 Country	29 Country	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent BENNETT, TIMOTHY J 1611 STATE ROAD 15A #4 DELAND FL 32724		10. Name and Address of New Registered Agent 81 MICHAEL DINNIE KIRKLAND 82 Street Address (P.O. Box Number is Not Acceptable) 1611 STATE ROAD 15A 83 84 City Deland FL 85 Zip Code 32724	
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11. Pursuant to the provisions of Sections 607.0202 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0202, Florida Statutes.

SIGNATURE *[Signature]* (NOTE: Registered Agent's signature required when installing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	0 BENNETT, TIMOTHY J	1.1 TITLE	☐ Change ☐ Addition
NAME	BENNETT, TIMOTHY J	1.2 NAME	
STREET ADDRESS	1611 STATE ROAD 15A #4	1.3 STREET ADDRESS	
CITY-ST-ZIP	DELAND FL 32724	1.4 CITY-ST-ZIP	
TITLE	0 KIRKLAND, MICHAEL	2.1 TITLE	☐ Change ☐ Addition
NAME	KIRKLAND, MICHAEL	2.2 NAME	
STREET ADDRESS	1611 STATE ROAD 15A #4	2.3 STREET ADDRESS	
CITY-ST-ZIP	DELAND FL 32724	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	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP	☐ DELETE	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☒ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP	☐ DELETE	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP	☐ DELETE	6.4 CITY-ST-ZIP	

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-06/17/98-01054-005
***150.00

14. 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, further certify that the information indicated 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 unchanged, or in an attachment with an address.

4/14/98

CR2E034 (10/97)