

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State
 05-22-2002 90162 035 ***150.00

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DOCUMENT # P98000054151

1. Entity Name
Q-SEC, INC.

Principal Place of Business
202 PILAKLAKAHA AVE
AUBURDALE FL 33823

Mailing Address
202 PILAKLAKAHA AVE
AUBURDALE FL 33823



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
290 Ave A NW
 Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 934
 Suite, Apt. #, etc.

City & State
Winter Haven FL
 Zip
33881
 Country
US

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Winter Haven FL
 Zip
33881
 Country
US

4. FEI Number
59-3543212

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BOONE, STEPHEN F
528 ARNESON AVE.
AUBURDALE FL 33823

7. Name and Address of New Registered Agent

Name
Mark Kingham
 Street Address (P.O. Box Number is Not Acceptable)
2538 Partridge Dr.
 City
Winter Haven **FL** Zip Code
33884

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.

SIGNATURE **Mark Kingham, President**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

4/29/02
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
PST
 NAME
BOONE, STEPHEN F
 STREET ADDRESS
2215 DREXEL BLVD.
 CITY-ST-ZIP
AUBURDALE FL 33823 ☒ Delete

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
President ☐ Change ☒ Addition
 NAME
Mark Kingham
 STREET ADDRESS
2538 Partridge Dr.
 CITY-ST-ZIP
Winter Haven FL 33884

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Mark Kingham, President**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone # **863-298-8844**

CR2E034 (9/01)