

2020 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000004195

Entity Name: QLARANT, INC.**Current Principal Place of Business:**28464 MARLBORO AVE
EASTON, MD 21601**Current Mailing Address:**28464 MARLBORO AVE
EASTON, MD 21601 US**FEI Number:** 26-3670453**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	C
Name	SMOOT-HASELNUS, CATHERINE MD
Address	28464 MARLBORO AVE
City-State-Zip:	EASTON MD 21601

Title	VC
Name	MURRAY, JOHN ESQ.
Address	28464 MARLBORO AVE
City-State-Zip:	EASTON MD 21601

Title	DST
Name	SCHIFF, MARGARET CPA
Address	28464 MARLBORO AVE
City-State-Zip:	EASTON MD 21601

Title	P
Name	FORSYTHE, RONALD PHD
Address	28464 MARLBORO AVE
City-State-Zip:	EASTON MD 21601

Title	VP
Name	KELLER, DEBORAH
Address	28464 MARLBORO AVE
City-State-Zip:	EASTON MD 21601

Title	D
Name	JEFFREY, TURNER
Address	28464 MARLBORO AVE
City-State-Zip:	EASTON MD 21601

Title	D
Name	GALLAHER, MAGGIE MD
Address	28464 MARLBORO AVE
City-State-Zip:	EASTON MD 21601

Title	D
Name	GERALD, MELVIN MD
Address	28464 MARLBORO AVE
City-State-Zip:	EASTON MD 21601

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: REBECCA COMBS**CFO****03/24/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title D
Name WOODS, REGINA KNOX
Address 28464 MARLBORO AVE
City-State-Zip: EASTON MD 21601

Title D
Name WILLIAMS, J. BRUCE
Address 28464 MARLBORO AVE
City-State-Zip: EASTON MD 21601

Title CFO
Name COMBS, REBECCA
Address 28464 MARLBORO AVE
City-State-Zip: EASTON MD 21601

Title D
Name NEAL, AMANDA
Address 28464 MARLBORO AVE
City-State-Zip: EASTON MD 21601

Title D
Name SIMPSON, SENORA DRPH
Address 28464 MARLBORO AVE
City-State-Zip: EASTON MD 21601