

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000057843

Entity Name: FAMILY QUEST, INC.

FILED
Jan 23, 2004
Secretary of State

Current Principal Place of Business:

1095 LEWIS AVE.
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

1095 LEWIS AVE
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 04-3667238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRES, ALEX L
1095 LEWIS AVE.
SARASOTA, FL 34237

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ESTRADA, MARIE
Address: 1095 LEWIS AVE
City-St-Zip: SARASOTA, FL 34237

Title: V () Delete
Name: TORRES, ALEX
Address: 1095 LEWIS AVE
City-St-Zip: SARASOTA, FL 34237

Title: D () Delete
Name: VENTURINA, AIMEE
Address: 4 HOLLYBERRY DR
City-St-Zip: BETHEL, CT 06801

Title: D () Delete
Name: VENTURINA, JOHN
Address: 4 HOLLYBERRY DR
City-St-Zip: BETHEL, CT 06801

Title: D () Delete
Name: ESCOBAR, CRISTETA
Address: 212 ELIOT AVE.
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ESTRADA, MARIE
Address: 2221 JO AN DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARIE L. ESTRADA

PRES

01/23/2004

Electronic Signature of Signing Officer or Director

Date