

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N40631

**Entity Name:** QUEST FOR COLLIER COUNTY, INC.**Current Principal Place of Business:**2706 S HORSESHOE DR.  
NAPLES, FL 34104**Current Mailing Address:**2706 S HORSESHOE DR.  
NAPLES, FL 34104**FEI Number:** 65-0232400**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOHNSON, F E  
C/O CHEFFY PASSIDOMO WILSON & JOHNSON  
821 FIFTH AVE SOUTH 201  
NAPLES, FL 34102 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	MORTON, EDWARD M
Address	P O BOX 413029
City-State-Zip:	NAPLES FL 34101

Title	T
Name	BAUS, COLLEEN
Address	330 PINEHURST CIR
City-State-Zip:	NAPLES FL 34113

Title	S
Name	MCKENRY, PAMELA N
Address	2950 KINGSLAKE BLVD.
City-State-Zip:	NAPLES FL 34112

Title	D
Name	RICHTER, GARRETT
Address	2320 HARRIER RUN
City-State-Zip:	NAPLES FL 34105

Title	D
Name	GOODLETTE, DUDLEY J
Address	4001 TAMiami TRAIL N #300
City-State-Zip:	NAPLES FL 34103

Title	VC
Name	KENNEDY, MICHAEL W
Address	146 OAKWOOD COURT
City-State-Zip:	NAPLES FL 34110

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:** COLLEEN P BAUS**TREASURER****04/24/2014**

Electronic Signature of Signing Officer/Director Detail

Date