

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000138044

**Entity Name:** QUEST FOR SUCCESS LLC

**Current Principal Place of Business:**

2706 S. HORSESHOE DR.  
NAPLES, FL 34104

**Current Mailing Address:**

2706 S. HORSESHOE DR.  
NAPLES, FL 34104 US

**FEI Number:** 00-0000000

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HL STATUTORY AGENT, INC.  
5811 PELICAN BAY BLVD., STE. 650  
NAPLES, FL 34108 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

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           GOODLETTE, DUDLEY  
Address        2706 S. HORSESHOE DR.  
City-State-Zip: NAPLES FL 34104

Title           MANAGER  
Name           MCLAUGHLIN, JUSTIN  
Address        2706 S. HORSESHOE DR.  
City-State-Zip: NAPLES FL 34104

Title           MANAGER  
Name           MELLON, RICK  
Address        2706 S. HORSESHOE DR.  
City-State-Zip: NAPLES FL 34104

Title           MANAGER  
Name           MORTON, ED  
Address        2706 S. HORSESHOE DR.  
City-State-Zip: NAPLES FL 34104

Title           MANAGER  
Name           RICHTER, GARRETT  
Address        2706 S. HORSESHOE DR.  
City-State-Zip: NAPLES FL 34104

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JUSTIN MCLAUGHLIN

**MANAGER**

**04/30/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date