

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 527821

FILED
Feb 09, 2012
Secretary of State

Entity Name: YOUNGQUIST BROTHERS, INC.

Current Principal Place of Business:

15465 PINE RIDGE ROAD
FT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

15465 PINE RIDGE ROAD
FT MYERS, FL 33908

New Mailing Address:

FEI Number: 59-1836961

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHOENFELD, LOWELL
1380 ROYAL PALM SQ BLVD
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

FRIDAY, RICHARD
15465 PINE RIDGE RD
FORT MYERS, FL 33908 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: RICHARD O FRIDAY

02/09/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSD
Name: YOUNGQUIST, TIM
Address: 15465 PINE RIDGE ROAD
City-St-Zip: FT. MYERS, FL 33908

Title: V
Name: BRANTLEY, JAMES F
Address: 15465 PINE RIDGE ROAD
City-St-Zip: FT. MYERS, FL 33908

Title: D,T
Name: YOUNGQUIST, HARVEY
Address: 15465 PINE RIDGE ROAD
City-St-Zip: FT. MYERS, FL 33908

Title: V
Name: YOUNGQUIST, HARVEY JR
Address: 15465 PINE RIDGE ROAD
City-St-Zip: FT MYERS, FL 33908

Title: V
Name: YOUNGQUIST, BRETT
Address: 15465 PINE RIDGE RD
City-St-Zip: FT MYERS, FL 33908

Title: V
Name: MUSSELWHITE, CHARLES
Address: 15465 PINE RIDGE RD
City-St-Zip: FT MYERS, FL 33908

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

SIGNATURE: TIM YOUNGQUIST

PRES

02/09/2012

Electronic Signature of Signing Officer or Director

Date