

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000297

FILED  
Apr 18, 2005  
Secretary of State

Entity Name: QUEST ASSET MANAGEMENT, INC.

## Current Principal Place of Business:

1100 TOWN & COUNTRY ROAD, SUITE 1100  
ORANGE, CA 92868

## New Principal Place of Business:

## Current Mailing Address:

1100 TOWN & COUNTRY ROAD, SUITE 1100  
ORANGE, CA 92868

## New Mailing Address:

FEI Number: 81-0587221

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 US

## 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: DSVP ( ) Delete  
Name: BASS, ADAM J  
Address: 9715 HENSAL ROAD  
City-St-Zip: BEVERLY HILLS, CA 90210

Title: EVP ( ) Delete  
Name: GRAZER, JOHN P  
Address: 22646 SACEDON  
City-St-Zip: MISSION VIEJO, CA 92691

Title: VSD ( ) Delete  
Name: NOTO, THOMAS J  
Address: 1934 PORT PROVENCE PLACE  
City-St-Zip: NEWPORT BEACH, CA 92660

Title: AS ( ) Delete  
Name: TIBEREND, DIANE E  
Address: 14561 HARPER STREET  
City-St-Zip: MIDWAY CITY, CA 92655

Title: P ( ) Delete  
Name: COOK, WILLIAM L  
Address: 1100 TOWN & COUNTRY RD STE 1100  
City-St-Zip: ORANGE, CA 92868

Title: AS ( ) Delete  
Name: APICELLA, DENISE  
Address: 1100 TOWN & COUNTRY RD STE 450  
City-St-Zip: ORANGE, CA 92868

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: DIANE TIBEREND

AS

04/18/2005

Electronic Signature of Signing Officer or Director

Date