

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K00928

1. Entity Name

QUEST SOLUTIONS, INC.

**FILED**  
**Apr 11, 2001 8:00 am**  
**Secretary of State**

04-11-2001 90032 050 \*\*\*150.00

Principal Place of Business

5011 OCEAN BLVD.  
SARASOTA FL 34242

Mailing Address

5011 OCEAN BLVD.  
SARASOTA FL 34242

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0024546**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LANGEDYK, RICHARD J  
5376 SHADOWLAWN DRIVE  
SARASOTA FL 34242

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	CD	LANGEDYK, RICHARD J	5376 SHADOWLAWN DRIVE SARASOTA FL 34242				
	D	ZEITLER, MARKUS	5045 OXFORD DR SARASOTA FL 34242				
	DP	STAMP, ANDREW J	5277 SUNNYDALE CIR., EAST SARASOTA FL 34233				
	VD	BUTOR, JOHN A	3821 EASTON ST SARASOTA FL 34238				

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Richard J. Langedyk* RICHARD J. LANGEDYK

Date

Daytime Phone #

CR2E034 (10/00)