

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056922

Entity Name: CHIPQUEST, LLC

FILED  
Jan 05, 2006  
Secretary of State

**Current Principal Place of Business:**

615 N. U.S. HIGHWAY 17-92, SUITE 102-A  
DEBARY, FL 32713

**New Principal Place of Business:**

615 N. U.S. HIGHWAY 17-92,  
SUITE 102-A  
DEBARY, FL 32713

**Current Mailing Address:**

P.O. BOX 530925  
DEBARY, FL 32753

**New Mailing Address:**

FEI Number: 43-2057336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ARZIGIAN, ROBERT T  
615 N. U.S. HIGHWAY 17-92, SUITE 102-A  
DEBARY, FL 32713 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ARZIGIAN, ROBERT T  
Address: 615 N. U.S. HIGHWAY 17-92, SUITE 102-A  
City-St-Zip: DEBARY, FL 32713

**ADDITIONS/CHANGES:**

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 Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: ROBERT T. ARZIGIAN

MGRM

01/05/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date