

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L34964

FILED
Jan 16, 2009
Secretary of State

Entity Name: QUEST CONTROLS, INC.

Current Principal Place of Business:

208 9TH ST DRIVE WEST
PALMETTO, FL 342211802

New Principal Place of Business:

Current Mailing Address:

208 9TH ST DRIVE WEST
PALMETTO, FL 342211802

New Mailing Address:

FEI Number: 65-0159809 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARTIROME, ANTHONY D
2 N TAMIAMI TRAIL
SUTIE 408
SARASOTA, FL 34236 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: PCEO () Delete
Name: GOGGIN, EDWARD F.,
Address: 6907 RIVERVIEW BLVD.
City-St-Zip: BRADENTON, FL 34209

Title: CFO () Delete
Name: CHUCK FULKS,
Address: 5823 26TH ST. W.
City-St-Zip: BRADENTON, FL

Title: EVP () Delete
Name: NICKEL, KEN
Address: 1296 HARTWICK DR.
City-St-Zip: CAMINO, CA 95709

Title: D () Delete
Name: BRAGER, STUART
Address: 117 ZINFANDEL CIRCLE
City-St-Zip: SCOTTVALLEY, CA 90566

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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JACK FINCH

_____ Electronic Signature of Signing Officer or Director

CONT

01/16/2009

_____ Date