

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000008424

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: VISION QUEST LLC

**Current Principal Place of Business:**

16057 TAMPA PALMS BOULEVARD WEST  
# 232  
TAMPA, FL 336472001

**New Principal Place of Business:**

**Current Mailing Address:**

16057 TAMPA PALMS BOULEVARD WEST  
# 232  
TAMPA, FL 336472001

**New Mailing Address:**

FEI Number: 59-3615928

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROTH, CARL W  
11300 FT. KING ROAD  
DADE CITY, FL 335258512 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: MGR ( ) Delete  
Name: ROTH, CARL W  
Address: 16057 TAMPA PALMS BOULEVARD WEST, # 232  
City-St-Zip: TAMPA, FL 336472001

Title: MGR ( ) Delete  
Name: ROTH, DIANE D  
Address: 16057 TAMPA PALMS BOULEVARD WEST, # 232  
City-St-Zip: TAMPA, FL 336472001

**ADDITIONS/CHANGES:**

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 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: CARL W. ROTH

MGR

01/16/2009

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