

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002132

FILED
Jun 18, 2007
Secretary of State

Entity Name: RIVER QUEST OF FLORIDA, INC.

Current Principal Place of Business:

4401 PINE MEADOW CT.
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

4401 PINE MEADOW CT.
TAMPA, FL 33624

New Mailing Address:

FEI Number: 59-3638705 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

EMRICK, STEPHEN L
4401 PINE MEADOW CT.
TAMPA, FL 33624 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

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: EMRICK, STEPHEN L
Address: 4401 PINEMEADOW CT
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: WILSON, LARRY
Address: BURTON RD
City-St-Zip: PLANT CITY, FL

Title: D () Delete
Name: SHIVELY, BRAD
Address: 705 EAST BAY DR #161
City-St-Zip: LARGO, FL 33770

Title: D () Delete
Name: KITCHNER, DAVID
Address: PO BOX 123
City-St-Zip: SAFETY HARBOR, FL 34695

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN L. EMRICK

DC

06/18/2007

Electronic Signature of Signing Officer or Director

Date