## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000002132

Address:

City-St-Zip:

FILED Apr 28, 2009 Secretary of State

Entity Nar	ne: RIVER QUEST OF FLORIDA, II	IC.
Current P	rincipal Place of Business:	New Principal Place of Business:
4401 PINE TAMPA, FI	MEADOW CT. _ 33624	
Current Mailing Address:		New Mailing Address:
4401 PINE TAMPA, FI	MEADOW CT. _ 33624	
FEI Number:	59-3638705 FEI Number Applied Fo	r() FEI Number Not Applicable() Certificate of Status Desired()
Name and	Address of Current Registered A	ent: Name and Address of New Registered Agent:
	STEPHEN L MEADOW CT. _ 33624 US	
	named entity submits this statement e of Florida.	for the purpose of changing its registered office or registered agent, or both,
SIGNATUR	RE:	
	Electronic Signature of Regist	ered Agent Date
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	DC () Delete EMRICK, STEPHEN L 4401 PINEMEADOW CT TAMPA, FL 33624	Title: CEO (X) Change ( ) Addition Name: EMRICK, STEPHEN L Address: 4401 PINEMEADOW CT City-St-Zip: TAMPA, FL 33624
Title: Name: Address: City-St-Zip:	D ( ) Delete WILSON, LARRY BURTON RD PLANT CITY, FL	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D (X) Delete SHIVELY, BRAD 705 EAST BAY DR #161 LARGO, FL 33770	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D ( ) Delete KITCHNER, DAVID PO BOX 123 SAFETY HARBOR, FL 34695	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name:	( ) Delete	Title: D ( ) Change (X) Addition Name: KISTNER, KAREN

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.

Address:

City-St-Zip:

10480 IMPERAL DR.

LARGO, FL 33774

SIGNATURE: STEPHEN L. EMRICK CEO 04/28/2009