


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90067 034 ****70.00

DOCUMENT # N02000006195 1. Entry Name STRATOQUEST FOUNDATION, INC.			
Principal Place of Business 1930 FAIRVIEW DR. ORLANDO, FL 32804		Mailing Address 1930 FAIRVIEW DR. 1930 FAIRVIEW SHORES DR ORLANDO, FL 32804	
2. Principal Place of Business P.O. BOX 547247 Suite, Apt. #, etc.		3. Mailing Address P.O. BOX 547247 Suite, Apt. #, etc.	
City & State ORLANDO, FLORIDA Zip 32854 Country USA		City & State ORLANDO, FLORIDA Zip 32854 Country USA	
4. FEI Number 32-0029761		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KIRSCHENBAUM, JACK A 1800 W HIBISCUS BLVD., STE 138 MELBOURNE, FL 32901		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____			
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FRIEDEL, SHANON 1930 FAIRVIEW SHORES DR ORLANDO, FL 32804	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Thompson, Todd P.O. Box 470181 Celebration, FL 34747-0181
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JONES, DAVID 109 E CHURCH ST, 5TH FL ORLANDO, FL 32801	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Sakac, Matthew P.O. Box 427 Winter Park, FL 32790
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KIRSCHENBAUM, JACK A 1800 W HIBISCUS BLVD, STE 138 MELBOURNE, FL 32901	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FRIEDEL, SHANON P.O. BOX 547247 ORLANDO, FL 32854
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MITCHELL, JOE 109 E CHURCH ST, 5TH FL ORLANDO, FL 32901	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEARNS, CHERYL 613 Saddlebrook Lane Rye, NC 28376	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE <i>Shanon Friedel</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 4-01-04 Daytime Phone # 407.822.8953	