

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003157

FILED
May 08, 2006
Secretary of State

Entity Name: MEMORYQUEST, INC.

Current Principal Place of Business:

2171 W. PINE RIDGE BLVD.
BEVERLY HILLS, FL 34465

New Principal Place of Business:

4081 N. LECANTO HIGHWAY
BEVERLY HILLS, FL 34465 US

Current Mailing Address:

P. O. BOX 641123
BEVERLY HILLS, FL 34464

New Mailing Address:

FEI Number: 56-2342339 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:

PONDS, JOSEPH R JR
2171 W. PINE RIDGE BLVD.
BEVERLY HILLS, FL 34465 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: PD () Delete
Name: PONDS, JOSEPH R JR.
Address: 2171 W. PINE RIDGE BLVD.
City-St-Zip: BEVERLY HILLS, FL 34465

Title: SD () Delete
Name: PONDS, BRENDA G
Address: 2171 W. PINE RIDGE BLVD.
City-St-Zip: BEVERLY HILLS, FL 34465

Title: TD () Delete
Name: THOMAS, JOLETTE R
Address: 2171 W. PINE RIDGE BLVD.
City-St-Zip: BEVERLY HILLS, FL 34465

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH R. PONDS, JR.

PD

05/08/2006

Electronic Signature of Signing Officer or Director

Date