

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003157

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: MEMORYQUEST, INC.

**Current Principal Place of Business:**

4081 N. LECANTO HIGHWAY  
BEVERLY HILLS, FL 34465 US

**New Principal Place of Business:**

**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 ( )

**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:**

PONDS, JOSEPH R JR  
4502 W. ANGUS DRIVE  
BEVERLY HILLS, FL 34465 US

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:

04/30/2007

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: PD (X) Change ( ) Addition  
Name: PONDS, JOSEPH R JR.  
Address: 4502 W. ANGUS DRIVE  
City-St-Zip: BEVERLY HILLS, FL 34465

Title: SD (X) Change ( ) Addition  
Name: PONDS, BRENDA G  
Address: 4502 W. ANGUS DRIVE  
City-St-Zip: BEVERLY HILLS, FL 34465

Title: TD (X) Change ( ) Addition  
Name: THOMAS, JOLETTE R  
Address: 4502 W. ANGUS DRIVE  
City-St-Zip: BEVERLY HILLS, FL 34465

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: DR. JOSEPH R. PONDS, JR.

CEO

04/30/2007

Electronic Signature of Signing Officer or Director

Date