2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400006598

FILED Aug 08, 2005 Secretary of State

Entity Name: THE QUEST FOUNDATION OF CENTRAL FLORIDA, INC. **Current Principal Place of Business: New Principal Place of Business:** 14655 EAGLES CROSSING DRIVE ORLANDO, FL 32837 **Current Mailing Address: New Mailing Address:** 717 EAST OAK STREET KISSIMMEE, FL 34744 FEI Number: 20-1311778 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: Name and Address of New Registered Agent: BAUMRUK, ANDY J CPA BAILEY, ANDRAE 717 E. OAK STREET 14655 ÉAGLES CROSSING DRIVE KISSIMMEE, FL 34744 US ORLANDO, FL 32837 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: ANDRAE BAILEY 08/08/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BAILEY, ANDRAE Name: Name: 14655 EAGLES CROSSING DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32837 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: BAILEY, ZWINDA Name: Address: 14655 EAGLES CROSSING DRIVE Address: City-St-Zip: ORLANDO, FL 32837 City-St-Zip: Title: () Delete Title: () Change () Addition TAYLOR, SCOTT Name: Name: 212 W. MICHIGAN STREET Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: () Delete Title: Title: () Change () Addition BELL, JOHN Name: Name: Address: 1604 BEAR LAKE ROAD Address: City-St-Zip: BLACKFORD, GA 23917 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Ρ SIGNATURE: ANDRAE BAILEY 08/08/2005