2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006072

Entity Name: LIFEQUEST, INC.

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	/SON RIDGE D				
Current Mailing Address:			New Maili	New Mailing Address:	
PMB 203	PA PALMS BL\ 336472001	/D. W			
FEI Number: 26-2836865 FEI Number Applied For ()		FEI Number Not Appl	icable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
GOLD HORIZON FINANCIAL, INC. 30416 USF HOLLY DRIVE TAMPA, FL 33620 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: Electronic Signature of Registered Agent			t	 Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PCHR () D BLAGG, BRUCE 15924 DAWSON TAMPA, FL 3364	RIDGE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D TILLMAN, JEFF 707 W. REYNOLI PLANT CITY, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () C GLASS, GUY DR 911 EAST MCBEI TAMPA, FL 3360	RRY STREET	Title: Name: Address: City-St-Zip:	D (X) Change () Addition ENCINOSA, JENNIFER 25814 RISEN STAR DR WESLEY CHAPEL, FL 33544	
Title: Name: Address: City-St-Zip:	D () C VEDHANYAYAGA 6425 RENWICK C TAMPA, FL 3364	DIRCLE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D WILKERSON, ST. 10928 SAILBROO RIVERVIEW, FL	KE DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D VALDES, JOHN 11354 STRATTON TEMPLE TERRAC		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: BRUCE BLAGG PCHR 04/13/2009