

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006072

FILED
Apr 13, 2009
Secretary of State

Entity Name: LIFEQUEST, INC.

Current Principal Place of Business:

15924 DAWSON RIDGE DRIVE
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

16057 TAMPA PALMS BLVD. W
PMB 203
TAMPA, FL 336472001

New Mailing Address:

FEI Number: 26-2836865 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLD HORIZON FINANCIAL, INC.
30416 USF HOLLY DRIVE
TAMPA, FL 33620 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: PCHR () Delete
Name: BLAGG, BRUCE
Address: 15924 DAWSON RIDGE DRIVE
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: TILLMAN, JEFF
Address: 707 W. REYNOLDS ST.
City-St-Zip: PLANT CITY, FL 33860

Title: D () Delete
Name: GLASS, GUY DR.
Address: 911 EAST MCBERRY STREET
City-St-Zip: TAMPA, FL 33603

Title: D () Delete
Name: VEDHANYAYAGAM, ARUN DR.
Address: 6425 RENWICK CIRCLE
City-St-Zip: TAMPA, FL 3364717

Title: D () Delete
Name: WILKERSON, STAN
Address: 10928 SAILBROOKE DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: VALDES, JOHN
Address: 11354 STRATTON PARK DR.
City-St-Zip: TEMPLE TERRACE, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ENCINOSA, JENNIFER
Address: 25814 RISEN STAR DR
City-St-Zip: WESLEY CHAPEL, FL 33544

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 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

Electronic Signature of Signing Officer or Director

PCHR

04/13/2009

_____ Date