

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010831

FILED  
Feb 16, 2010  
Secretary of State

Entity Name: SUMMIT QUESTA PTO, INC.

**Current Principal Place of Business:**

5451 SW 64TH AVENUE  
DAVIE, FL 33314

**New Principal Place of Business:**

**Current Mailing Address:**

5451 SW 64TH AVENUE  
DAVIE, FL 33314

**New Mailing Address:**

FEI Number: 26-3258598

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STRAUSS, CHARLENE  
5451 SW 64TH AVENUE  
DAVIE, FL 33314 US

**Name and Address of New Registered Agent:**

GRANT, DIANE  
5451 SW 64TH AVENUE  
DAVIE, FL 33314 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: DIANE GRANT

02/16/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MURCK, MELISSA  
Address: 4910 SW 61ST AVENUE  
City-St-Zip: DAVIE, FL 33314

Title: VPD  
Name: SILVERMAN, SUZIE  
Address: 5308 SW 32 AVENUE  
City-St-Zip: HOLLYWOOD, FL 33312

Title: TD  
Name: GRANT, DIANE  
Address: 3240 SW 117 AVENUE  
City-St-Zip: DAVIE, FL 33330

Title: SD  
Name: WOODRUFF, ALEXANDRA  
Address: 1808 SW 10TH AVENUE  
City-St-Zip: FT. LAUDERDALE, FL 33315

Title: VPD  
Name: STRAUSS, CHARLENE  
Address: 971 E COUNTRY CLUB CIRLCE  
City-St-Zip: PLANTATION, FL 33317

I hereby 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 all other like empowered.

SIGNATURE: DIANE GRANT

TD

02/16/2010

Electronic Signature of Signing Officer or Director

Date