

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 05, 2011  
Secretary of State**

DOCUMENT# N10000007037

**Entity Name:** QUEZADA FAMILY CHARITIES, INC

**Current Principal Place of Business:**

3429 SLEEPY HILL OAKS ST  
LAKELAND, FL 33810

**New Principal Place of Business:**

**Current Mailing Address:**

3429 SLEEPY HILL OAKS ST  
LAKELAND, FL 33810

**New Mailing Address:**

**FEI Number:** 27-3222909      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

QUEZADA, JOSE R  
3429 SLEEPY HILL OAKS ST  
LAKELAND, FL 33810    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: P  
Name: QUEZADA, JOSE R  
Address: 3429 SLEEPY HILL OAKS ST  
City-St-Zip: LAKELAND, FL 33810

Title: CEO  
Name: QUEZADA, LIDIA D  
Address: 117 W 129 ST #2B  
City-St-Zip: NEW YORK, NY 10027

Title: T  
Name: QUEZADA, AYARILIS A  
Address: 3429 SLEEPY HILL OAKS ST  
City-St-Zip: LAKELAND, FL 33810

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: JOSE R QUEZADA

P

04/05/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date