

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13846

Entity Name: ACTIONQUEST, INC

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

1819 GLENGARY STREET
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 4009
SARASOTA, FL 34230 US

New Mailing Address:

PO BOX 5517
SARASOTA, FL 34277 US

FEI Number: 59-2651937

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOLL, JAMES M.
1819 GLENGARY STREET
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

MEIGHAN, MICHAEL J
1819 GLENGARY STREET
SARASOTA, FL 34231 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: MICHAEL J. MEIGHAN

04/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STOLL, JAMES M.
Address: 1819 GLENGARY STREET
City-St-Zip: SARASOTA, FL

Title: S () Delete
Name: STOLL, CAREEN
Address: 1819 GLENGARY STREET
City-St-Zip: SARASOTA, FL

Title: D () Delete
Name: STOLL, JASON
Address: 1819 GLENGARY STREET
City-St-Zip: SARASOTA, FL

Title: T () Delete
Name: NOBLE, BECKY S
Address: 1819 GLENGARY STREET
City-St-Zip: SARASOTA, FL

Title: VD (X) Delete
Name: MEIGHAN, MICHAEL
Address: 1819 GLENGARY STREET
City-St-Zip: SARASOTA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MEIGHAN, MICHAEL J
Address: 1819 GLENGARY STREET
City-St-Zip: SARASOTA, FL 34231

Title: S (X) Change () Addition
Name: MEIGHAN, JOANNE G
Address: 1819 GLENGARY STREET
City-St-Zip: SARASOTA, FL 34231

Title: T (X) Change () Addition
Name: MEIGHAN, JOANNE G
Address: 1819 GLENGARY STREET
City-St-Zip: SARASOTA, FL 34231

Title: D (X) Change () Addition
Name: STOLL, JAMES M
Address: 1819 GLENGARY STREET
City-St-Zip: SARASOTA, FL 34231

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: MICHAEL MEIGHAN

MR.

04/16/2009

Electronic Signature of Signing Officer or Director

Date