

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000057843

Entity Name: FAMILY QUEST, INC.

FILED  
Apr 06, 2005  
Secretary of State

## Current Principal Place of Business:

1095 LEWIS AVE.  
SARASOTA, FL 34237

## New Principal Place of Business:

## Current Mailing Address:

1095 LEWIS AVE  
SARASOTA, FL 34237

## New Mailing Address:

FEI Number: 04-3667238

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TORRES, ALEX L  
1095 LEWIS AVE.  
SARASOTA, FL 34237 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ESTRADA, MARIE  
Address: 2221 JO AN DRIVE  
City-St-Zip: SARASOTA, FL 34231

Title: V ( ) Delete  
Name: TORRES, ALEX  
Address: 1095 LEWIS AVE  
City-St-Zip: SARASOTA, FL 34237

Title: D ( ) Delete  
Name: VENTURINA, AIMEE  
Address: 4 HOLLYBERRY DR  
City-St-Zip: BETHEL, CT 06801

Title: D (X) Delete  
Name: VENTURINA, JOHN  
Address: 4 HOLLYBERRY DR  
City-St-Zip: BETHEL, CT 06801

Title: D (X) Delete  
Name: ESCOBAR, CRISTETA  
Address: 212 ELIOT AVE.  
City-St-Zip: SARASOTA, FL 34232

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIE L. ESTRADA

PRE

04/06/2005

Electronic Signature of Signing Officer or Director

Date