## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000126287

Entity Name: SUNSHINE QUEST MORTGAGE COMPANY, INC.

FILED Jan 10, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4974 W IRIO BRONSON MEMORIAL HWY 1700 W. VINE STREET SAINT CLOUD, FL 34772

KISSIMMEE, FL 34741

**Current Mailing Address: New Mailing Address:** 

717 EAST OAK STREET KISSIMMEE, FL 34744

FEI Number: 14-1857624 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GARCIA-MOORE, HILDA GARCIA-MOORE, HILDA 4974 W IRIO BRÓNSON MEMORIAL HWY 1700 W. VINE STREET SAINT CLOUD, FL 34772

KISSIMMEE, FL 34741 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: 01/10/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete Title: DPST (X) Change ( ) Addition

GARCIA-MOORE, HILDA GARCIA-MOORE, HILDA Name: Name: 4974 W IRIO BRONSON MEMORIAL HWY Address: 1700 W. VINE STREET Address: KISSIMMEE, FL 34741

City-St-Zip: SAINT CLOUD, FL 34772 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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: HILDA GARCIA-MOORE **DPST** 01/10/2007

Electronic Signature of Signing Officer or Director

Date