

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000158027

FILED  
Sep 28, 2009  
Secretary of State

**Entity Name:** PRIMEQUEST WEALTH MANAGEMENT, INC.

**Current Principal Place of Business:**

800 MAITLAND AVENUE  
ALTAMONE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 780873  
ORLANDO, FL 32878

**New Mailing Address:**

800 MAITLAND AVENUE  
ALTAMONE SPRINGS, FL 32701

**FEI Number:** 33-1106619

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FILINGS, INC.  
3732 N.W. 16TH STREET  
FT. LAUDERDALE, FL 333114132 US

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

BASS, JAMES M PRES.  
800 MAITLAND AVENUE  
ALTAMONTE SPRINGS, FL 32701 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: JAMES M. BASS

09/28/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BASS, J. MICHAEL  
Address: 800 MAITLAND AVENUE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VSTD ( ) Delete  
Name: BASS, WILLIAM D  
Address: 455 HARRISON AVENUE, SUITE C  
City-St-Zip: PANAMA CITY, FL 32401

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. MICHAEL BASS

PRES

09/28/2009

Electronic Signature of Signing Officer or Director

Date