2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000034509

Entity Name: LEISURE QUEST ASSOCIATES, INC.

FILED Apr 26, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
8429 BONITA ISLE DRIVE LAKE WORTH, FL 33467 US						
Current Mailing Address:			New Maili	New Mailing Address:		
8429 BONITA ISLE DRIVE LAKE WORTH, FL 33467 US						
FEI Number:	20-2458254 F	FEI Number Applied For () FEI	Number Not Appl	licable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
ID-DEEN, SULUKI 8429 BONITA ISLE DRIVE LAKE WORTH, FL 33467 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:						
Electronic Signature of Registered Agent				Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () De ID-DEEN, SULUKI 8429 BONITA ISLE LAKE WORTH, FL	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () De ROBINSON, JASON 430 NW 6TH AVEN BOYNTON BEACH,	N UE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SEC () De CHRISTIE, BEVON 705 SW 107TH AVI PEMBROKE PINES	ENUE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () De POWELL, ENEZ 360 SHERWOOD F DELRAY BEACH, F	FOREST DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () De KENNARD, CLEVE 8429 BONITA ISLE LAKE WORTH, FL	LAND DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D () De JONES, DAN C/O 8429 BONITA LAKE WORTH, FL	ISLE DRIVE	Title: Name: Address: City-St-Zip:	D (X) Change () Addition JONES, DANIEL 2305 PRIMROSE VALLEY CT RALEIGH, NC 27613		
I hereby certify that the information supplied with this filing does not qualify for the 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: SULUKI ID-IDEEN PRES 04/26/2006