

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000075729

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** QUENTIN CORPORATION

**Current Principal Place of Business:**

5313 MILL STREAM DRIVE  
SAINT CLOUD, FL 34771 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 702284  
SAINT CLOUD, FL 34770 US

**New Mailing Address:**

**FEI Number:** 55-0898450

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EHRINGER, JON N PHD  
1411 N SEFFNER-VALRICO RD.  
SEFFNER, FL 33584 US

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

EHRINGER, JON N PHD  
1411 N SEFFNER-VALRICO RD  
SEFFNER, FL 33584 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

02/18/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: MR  
Name: PALASCAK, GREGORY  
Address: 5313 MILL STREAM DRIVE  
City-St-Zip: SAINT CLOUD, FL 34771 US

Title: MRS  
Name: PALASCAK, PATRICIA J  
Address: 5313 MILL STREAM DRIVE  
City-St-Zip: SAINT CLOUD, FL 34771 US

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA J PALASCAK

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

MRS.

02/18/2011

\_\_\_\_\_  
Date