FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthan

Secretary of State

DIVISION OF CORPORATIONS

1996
DOCUMENT #
1, Corporation Name

SIGNATURE

P93000008619 (7)

FUN Q	UEST INC.			1 FRANÇAN NE IBNAR NINA BANA BANA	F BOIRE BORNE BORNE HOND BUILDE INDIA 1804 (BO)
Principal Place	of Business	Mailing Address			
2352 S FERDON BLVD CRESTVIEW FL 32536		114 LIVE OAK CT. CRESTVIEW FL 3253	6		
US				3. Date Incorporated or Qualified	3a. Date of Last Report
	THE RESIDENCE OF THE PROPERTY			01/29/1993	04/21/1995
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Númber	Applied For
Suite, Apt. #	etc	Suite, Apt. #, etc.		59-3166986	Not Applicable \$8.75 Additional
22	, 010.	27		5. Cert ficate of Status Desired	Fee Required
City & State		City & State	***************************************	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,
24	25	29	30	Florida Statutes 🔀 Yes	
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New R	egistered Agent
			81 Name		
SMALLWOOD, LARRY 82			82 Street Add	ress (P.O. Box Number is Not Acceptabl	le)
	OAK CT.		83		
CRESTV	1EW FL 32536		63		
			84 City		85 Zip Code
11 Burguent to	the equipped of Castions 607 0503	and 607 1508 Florida Status	tos the above period corre	oration submits this statement for the purp	FL The secretarial office
or registere	ed agent, or both, in the State of Florida, and accept the obligations of, Secti	ta. Such change was authori	zed by the corporation's bo:	ard of directors. Thereby accept the appo	pose of changing its registered office pintment as registered agent. Fam
SIGNATURE					
	Signature: typed or printed name of regiment agent OFFICERS AN:		i.21E. Begistered Aji ot signaturi requir		DATE
12. TITLE	D OFFICERS AN.	DELETE	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition
NAME	SMALLWOOD, LARRY	_ Carere	1.2 NAME		C. Change C. Nation
STREET ADDRESS	114 LIVE OAK COURT		1.3 STREET ADDRESS		
CITY - ST - ZIP	CRESTVIEW FL 32536		1.4 C-TY - S1 - Z-P		
THILE	VS	DELETE	2 1 Tille		Change Addition
NAME	SMALLWOOD, LYNN		2.2 NAME		
STREET ADDRESS	114 LIVE OAK CT.		2.3 STREET ADDRESS		
CITY - ST - ZIP	CRESTVIEW FL 32536		2.4 C/TY - ST - 7:P		
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4 CITY - ST - ZIP		
TITLE		☐ DELETE	4 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP	······································	C DC: ETC	4.4 CBY · S¹ - ZiP		ED Character ED Addition
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STHEET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CHY+ST-ZIP 6.1 TiTLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		'
CITY - ST - ZIP			6.4 City - St - ZiP		
14. I do hereby	certify that the information supplied	with this filing is voluntarily fur	mished and does not qualify	for the exemption stated in Section 119.	07(3)(k), Florida Statutes. I further
certify that	the information indicated on this annu	ial report or supplemental an	nual report is true and accur	ate and that my signature shall have the is report as required by Chapter 607, Flo	same legal effect as if made under

LARRY SMALLWOOD

16 April 96 904-682-0433