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Feb 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000039363 (5)

1. Corporation Name
QUEST FINANCIAL CORP.

Principal Place of Business
601 VETERANS HIGHWAY
HAUPPAUGE NY 11788

Mailing Address
601 VETERANS HWY
HAUPPAUGE NY 11788-2851
US

3. Date Incorporated or Qualified
06/03/1993

3a. Date of Last Report
05/01/1996

4. FEI Number
11-3161951

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

BURZOTTA, JAMES
601 VETERANS HWY
HAUPPAUGE FL 33442

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME
BURZOTTA, JAMES P
STREET ADDRESS
601 VETERANS HWY
CITY - ST - ZIP
HAUPPAUGE NY

TITLE ☐ DELETE

NAME
MCCATHREN, RANDALL
STREET ADDRESS
2000 RICHARD JONES RD, STE 170
CITY - ST - ZIP
NASHVILLE TN

TITLE ☒ DELETE

NAME
ROSS, R. SCOTT
STREET ADDRESS
601 VETERANS HWY
CITY - ST - ZIP
HAUPPAUGE NY

TITLE ☐ DELETE

NAME
MAHONEY, GERARD
STREET ADDRESS
601 VETERANS HWY
CITY - ST - ZIP
HAUPPAUGE NY

TITLE ☐ DELETE

NAME
BURWELL, CLIFF
STREET ADDRESS
601 VETERANS HWY
CITY - ST - ZIP
HAUPPAUGE NY

TITLE ☐ DELETE

NAME
LOSHIN, RONALD
STREET ADDRESS
2950 MERRET ST
CITY - ST - ZIP
SAN LEANDRO CA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

Secretary/Vice President
Gerard Mahoney

President
Clifford Burwell

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Clifford Burwell 2/12/97 516 979-1000

CR2E034 (9/96)