

5-7-97B-6535 -C
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FILED
May 07 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 # P93000045600 (2)
1. Corporation Name
TOMORROW QUEST EDUCATIONAL SERVICES, INC.



Principal Place of Business

28471 U.S. 19 N
CLEARWATER FL 34621
US

Mailing Address

28471 U.S. 19 N
CLEARWATER FL 34621-2517
US

2. Principal Place of Business

21 2440 S.R. 580

Suite, Apt. #, etc.

22 SUITE 13A

City & State

23 CLEARWATER, FL

Zip

24 34621

Country

25 US

2a. Mailing Address

26 2440 S.R. 580

Suite, Apt. #, etc.

27 SUITE 13A

City & State

28 CLEARWATER, FL

Zip

29 34621

Country

30 U.S.

3. Date Incorporated or Qualified

06/22/1993

3a. Date of Last Report

04/25/1996

4. FEI Number

59-3189310

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

9. Name and Address of Current Registered Agent

COOK, BRYAN T.
28471 U.S. 19 N
CLEARWATER FL 34621

10. Name and Address of New Registered Agent

81 Name COOK, BRYAN T.
82 Street Address (P.O. Box Number is Not Acceptable)
2440 S.R. 580
83 SUITE 13A
84 City CLEARWATER, FL 85 Zip Code 34621

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 PSD ☐ DELETE

NAME COOK, BRYAN T
STREET ADDRESS 28471 U.S. 19 N
CITY-ST-ZIP CLEARWATER FL

TITLE D ☐ DELETE

NAME COOK, PATRICIA A
STREET ADDRESS 28471 U.S. 19 N
CITY-ST-ZIP CLEARWATER FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 2440 S.R. 580, SUITE 13A
1.4 CITY-ST-ZIP CLEARWATER, FL 34621

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 2440 S.R. 580, SUITE 13A
2.4 CITY-ST-ZIP CLEARWATER, FL 34621

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

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.

CR2E034 (9/96)