

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

May 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000012789 (0)

1. Corporation Name

QUESTA INCORPORATED

Principal Place of Business

14480 62ND ST. NORTH
CLEARWATER FL 34620

Mailing Address

14480 62ND ST. NORTH
CLEARWATER FL 34620

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/14/1995

4. FEI Number

58-2157370

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

33760

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

33758

Country

30

9. Name and Address of Current Registered Agent

GRAS, JUDITH A
14480 - 62ND ST., NORTH
CLEARWATER FL 34620

10. Name and Address of New Registered Agent

81 Name

Karen S. McLead

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

14480 62nd Street North

83

84 City

Clearwater

FL

85

Zip Code
33760

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

Karen S. McLead

Karen S. McLead

April 22, 1998

Signature typed or printed name of registered agent and filed if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
CEOD
THOMAS, FRED A
STREET ADDRESS
14480 62ND ST. NORTH
CITY-ST-ZIP
CLEARWATER FL

TITLE ☐ DELETE

NAME
PT
EISCH, JAMES P
STREET ADDRESS
14480 62ND ST N
CITY-ST-ZIP
CLEARWATER FL

TITLE ☐ DELETE

NAME
VP
THOMAS, JOHN C
STREET ADDRESS
14480 62ND ST N
CITY-ST-ZIP
CLEARWATER FL

TITLE ☒ DELETE

NAME
S
GRAS, JUDITH A
STREET ADDRESS
14480 62ND ST N
CITY-ST-ZIP
CLEARWATER FL

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

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

S
Karen S. McLead
14480 62nd Street North
Clearwater, FL 33760

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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

John C. Thomas - Vice President (813) 531-8913

CR2E034 (10/97)