

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000022364

Entity Name: HOME QUEST, INC.

FILED
Mar 07, 2005
Secretary of State

Current Principal Place of Business:

2705 CRAYTON RD
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8327
NAPLES, FL 34101 US

New Mailing Address:

FEI Number: 65-0573165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'KANE, JUDITH
2705 CRAYTON RD
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

O'KANE, ALEXANDER
2705 CRAYTON RD
NAPLES, FL 34103 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: ALEXANDER O'KANE

03/07/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVT () Delete
Name: JANSSON, CHRISTER
Address: 2705 CRAYTON RD
City-St-Zip: NAPLES, FL 34105

Title: S (X) Delete
Name: BUDD, RUSSELL A
Address: 4395 CRAYTON ROAD
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: BUDD, RUSSELL A
Address: 4395 CRAYTON RD
City-St-Zip: NAPLES, FL 34104

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RUSSEL BUDD

S

03/07/2005

Electronic Signature of Signing Officer or Director

Date