195000058579

(Requestor's Name)			
·			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
·			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
•			
Special Instructions to Eiling Officer			
Special Instructions to Filing Officer:			
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Office Use Only



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RO Charge Theres 04/25/07-01016-023

COVER LETTER

Division	of Corporations	
SUBJECT:	Vision Quest Investments, I	nc.
200001	(Name of Co	rporation)
DOCUMENT N	UMBER: P95000058579	
The enclosed Stat	ement of Change of Registered Office	'Agent and fee are submitted for filing.
Please return all c	correspondence concerning this matter	to the following:
George	G. Pappas	•
	(Name of Con	tact Person)
	George G. Pappas P.A.	
(Firm/Company)		
	1822 North Belcher Road, S	uite 200
	(Addre	ess)
	Clearwater, Florida 33765	
	(City/State and	Zip Code)
For further inform	nation concerning this matter, please ca	ılt:
George	G. Pappas	at (727 447 ₅ 4999
(N	ame of Contact Person)	at (727 447-4999) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.	00 check made payable to the Departn	nent of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO:

Amendment Section

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is subm	sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this sted for a corporation organized under the laws of the State of $\frac{\mathtt{Florida}}{\mathtt{Florida}}$ is registered office or registered agent, or both, in the State of Florida.
. 1. The name of the corporati	Vision Quest Investments, Inc.
•	s: 10628 Pontifino Circle
2. The principal office dedic	Trinity, Florida 34655
3. The mailing address (if di	ferent): same
4. Date of incorporation/qua	fication: 7-27-95 Document number: P95000058579
The name and street addre Florida Department of Sta	
	George G Pappas PA
	901 North Hercules Avenue, Suite C
	Clearwater, Florida 33765
6. The name and street addre (if changed):	Clearwater, Florida 33765 s of the new registered agent (if changed) and /or registered office REFERENCE SSTARS S
	George G Pappas PA
	George G Pappas PA 1822 North Belcher Road, Suite 200 (P.O. Box NOT acceptable)
	. 7
	Clearwater, Florida 33765
The street address of its reg as changed will be identical	stered office and the street address of the business office of its registered agent,
Such change was authorized authorized by the board, or	by resolution duly adopted by its board of directors or by an officer so he corporation has been notified in writing of the change.
2//	Trifon Houvardas, Director
(Signature of an officer of	director) (Printed or typed name and title)
I hereby accept the appoints further agree to comply wing my duties, and I am familiated mer comment is being filed mer corporation has been notified.	nent as registered agent and agree to act in this capacity. In the provisions of all statutes relative to the proper and complete performance ar with and accept the obligation of my position as registered agent. Or, if this ly to reflect a change in the registered office address, I hereby confirm that the lin writing of this change.
14/	April , 2007
f signing on behalf of an en	. ()
George G. Pappas (Typed or Printed)	ame)

* * * FILING FEE: \$35.00 * * *