

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000061473

FILED  
Apr 30, 2003  
Secretary of State

**Entity Name:** QUESENBERRY ENTERPRISES, INC.

**Current Principal Place of Business:**

7535 SW 62ND CT  
OCALA, FL 34476

**New Principal Place of Business:**

**Current Mailing Address:**

7535 SW 62ND CT  
OCALA, FL 34476

**New Mailing Address:**

**FEI Number:** 59-3390412

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

QUESENBERRY, DENNIS  
6382 SW 21ST CT RD  
OCALA, FL 34474 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: QUESENBERRY, DENNIS  
Address: 6382 SW 21 CT RD  
City-St-Zip: OCALA, FL 34474

Title: ST ( ) Delete  
Name: QUESENBERRY, DONNA  
Address: 6382 SW 21ST CT RD  
City-St-Zip: OCALA, FL 34474

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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:** DONNA QUESENBERRY

ST

04/30/2003

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date