

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000096226

FILED  
Apr 13, 2011  
Secretary of State

**Entity Name:** QUEST COMPANY OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

1180 SPRING CENTRE SOUTH BLVD  
SUITE 102  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

1180 SPRING CENTRE SOUTH BLVD  
SUITE 102  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

**FEI Number:** 59-3412036

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAFRENIERE, STEPHEN J  
1180 SPRING CENTRE SOUTH BLVD  
SUITE 102  
ALTAMONTE SPRINGS, FL 32714 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LAFRENIERE, STEPHEN J  
Address: 989 BEARDED OAKS TERRACE  
City-St-Zip: LONGWOOD PARK, FL 32750

Title: VP  
Name: GRUBER, JAMES  
Address: 2020 SHARON ROAD  
City-St-Zip: WINTER PARK, FL 32789

Title: VP  
Name: MACLARTY, SUE W  
Address: 7022 DELORA DRIVE  
City-St-Zip: ORLANDO, FL 32809

Title: TCFO  
Name: LY, N. JULIE  
Address: 3537 CORAM LANE  
City-St-Zip: CASSELBERRY, FL 32707

I hereby 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 all other like empowered.

SIGNATURE: STEPHEN J LAFRENIERE

P

04/13/2011

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

\_\_\_\_\_  
Date