

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000010390

Entity Name: NATURE QUEST, INC.

FILED
May 09, 2005
Secretary of State

Current Principal Place of Business:

137 SOUTH WEST STEWART LOOP
LAKE CITY, FL 32024

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2999
LAKE CITY, FL 320562999

New Mailing Address:

FEI Number: 59-2885583 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWN, THOMAS W
10 NO COLUMBIA ST
LAKE CITY, FL 32055 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FREE, JAMES R
Address: 137 SOUTH WEST STEWART LOOP
City-St-Zip: LAKE CITY, FL 32024

Title: D () Delete
Name: FREE, TERESA M
Address: 137 SOUTH WEST STEWART LOOP
City-St-Zip: LAKE CITY, FL 32024

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 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: JAMES R. FREE

PRES

05/09/2005

Electronic Signature of Signing Officer or Director

Date