## 2004 FOR PROFIT CORPORATION

## Apr 27, 2004 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # P98000046699** 04-27-2004 90055 024 \*\*\*150.00 1. Entity Name QUESTAR QUAKERTOWN, INC. Principal Place of Business Mailing Address 44UUU411 2200 ROSS AVENUE, #3600 TENTH STREET C PARK AVE., 4D QUAKERTOWN, PA 18951 DALLAS, TX 75201 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04122004 Cha-P CR2E034 (10/03) City & State City & State 4 FEI Number Applied For 59-3520532 Not Applicable Zip \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 526 EAST PARK AVENUE TALLAHASSEE, FL 32301 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be SFILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. 10 7 74 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE NAME DCOP PIP ☐ Delete TITLE Addition LINEHAN, STEPHEN D NAME STREET ADDRESS 2200 ROSS AVE., STE 3600 STREET ADDRESS CITY ST ZIP **DALLAS, TX 75201** CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition JOLAS, PAUL M NAME NAME STREET ADDRESS 2200 ROSS AVE., STE 3600 STREET ADDRESS DALLAS, TX 75201 CITY-ST-ZIP CITY-ST-ZIE **CFOV** TITLE ☐ Delete TITLE **X** Change ☐ Addition NAME ABBASI, SAMI NAME 2200 ROSS AVE STE 3600 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DALLAS, TX 75201 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition real L. Silhol ress are, ste 3600 as, TX 75201 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE hard J. Sabolik Change Addition NAME NAME

12. 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

TITLE

NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

CER OR DIRECTOR

☐ Delete

4.21-04 214303 2717

☐ Change

☐ Addition

2200 ROSS AUD, Ste 3600

FILED