

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 05, 1999 8:00 am  
Secretary of State

05-05-1999 90195 049 \*\*\*150.00

DOCUMENT # P98000060657

1. Corporation Name  
CAPITAL QUEST HOMES, INC.

Principal Place of Business  
5005 WEST LAUREL ST.  
SUITE 201  
TAMPA FL 33607

Mailing Address  
5005 WEST LAUREL ST.  
SUITE 201  
TAMPA FL 33607



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/09/1998

4. FEI Number

593522186

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

DICKS, JAMES  
7028 W. WATERS AVE., STE. 343  
TAMPA FL 33634

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

James Dicks President

4/21/99

DATE

12. OFFICERS AND DIRECTORS

TITLE PST ☐ DELETE  
NAME DICKS, JAMES  
STREET ADDRESS 5005 W. LAUREL ST., STE. 201  
CITY-ST-ZIP TAMPA FL 33607

TITLE VP ☐ DELETE  
NAME LAPLANTE, ANDRE  
STREET ADDRESS 104 W. LOUISIANA AVE.  
CITY-ST-ZIP TAMPA FL 33603

TITLE VP ☐ DELETE  
NAME MORGAN, PHILIP  
STREET ADDRESS 6209 1/2 ELBRON ST.  
CITY-ST-ZIP TAMPA FL 33634

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME VP Philip Morgan  
3.3 STREET ADDRESS 7028 W. Waters Ave, #343  
3.4 CITY-ST-ZIP Tampa FL 33634

4.1 TITLE ☐ Change ☒ Addition  
4.2 NAME VP Todd Becker  
4.3 STREET ADDRESS 7028 W. Waters Ave, #343  
4.4 CITY-ST-ZIP Tampa FL 33634

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James Dicks President

4/21/99

813-637-8255

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0387040