

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S37347** (9)
1. Corporation Name
QUEST 2000, INC.



Principal Place of Business Mailing Address
**4400 EL CONQUISTADOR PKWY
STE 27
BRADENTON FL 34210
US**

3. Date Incorporated or Qualified **03/07/1991** 3a. Date of Last Report **06/09/1995**
4. FEI Number **59-3064423** Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country 30 Country

9. Name and Address of Current Registered Agent

**GRIFFIN, PATRICIA G.
4400 EL CONQUISTADOR PKWY
STE 27
BRADENTON FL 34210**

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

Signature Type for printed name of registered agent and then applicable

(NOTE: Registered Agent signature required when filing change)

DATE

12. OFFICERS AND DIRECTORS
TITLE **P** ☐ DELETE
NAME **GRIFFIN, JAMES A. III**
STREET ADDRESS **2201 CANTU COURT STE 200**
CITY - ST - ZIP **SARASOTA FL**
TITLE **VP** ☐ DELETE
NAME **GRIFFIN, PATRICIA G.**
STREET ADDRESS **2201 CANTU COURT STE 200**
CITY - ST - ZIP **SARASOTA FL**
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP
TITLE ☐ DELETE
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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 **President** ☒ Change ☐ Addition
1.2 NAME **GRIFFIN, JAMES A. III**
1.3 STREET ADDRESS **4400 EL CONQUISTADOR PKWY Suite 1**
1.4 CITY - ST - ZIP **BRADENTON FL 34210**
2.1 TITLE **Vice President** ☒ Change ☐ Addition
2.2 NAME **GRIFFIN, PATRICIA G.**
2.3 STREET ADDRESS **4400 EL CONQUISTADOR PKWY Suite 1**
2.4 CITY - ST - ZIP **BRADENTON FL 34210**
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Patricia G. Griffin
PATRICIA G. GRIFFIN

6/7/96 **941-727-1064**

CR2E034 (3/96)