FILED
Apr 30, 2004 08:00 AM
Secretary of State

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H99834

1. Entity Name
QUIETWATER ENTERTAINMENT, INC.

Principal Place of Business	Mailing Address
400 QUIETWATER BEACH ROAD PENSACOLA BEACH, FL 32561-2059	400 QUIETWATER BEACH ROAD PENSACOLA BEACH, FL 32561-2059

DO NOT WRITE IN THIS SPACE

04262004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-2644408

Applied For ☐
Not Applicable ☐

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CARMICHAEL, THOMAS
400 QUIETWATER BEACH ROAD
PENSACOLA BEACH, FL 32562

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Required Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	V
NAME	GUERRA, MICHAEL A.
STREET ADDRESS	23 ARTHUR STREET
CITY-ST-ZIP	PENSACOLA, FL
TITLE	S
NAME	CARMICHAEL, THOMAS
STREET ADDRESS	6229 VICKSBURG
CITY-ST-ZIP	PENSACOLA, FL 32503
TITLE	P
NAME	GUERRA, JUNE
STREET ADDRESS	23 ARHTUR STREET
CITY-ST-ZIP	PENSACOLA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 empowered.

SIGNATURE: Thomas D. CARMICHAEL 4-27-04 850 934-3108
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #