

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
 AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT 1999



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

**FILED**  
 Sep 08, 1999 8:00 am  
 Secretary of State

09-08-1999 90005 029 \*\*\*\*61.25

DOCUMENT # N43494

Corporation Name

A QUIET PLACE, INC.

Principal Place of Business  
 38 VENEER DRIVE  
 ALTAMONTE SPRINGS FL 32714

Mailing Address  
 608 VENEER DRIVE  
 ALTAMONTE SPRINGS FL 32714

613431-90005-29



Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
26		26		05/17/1991	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
27		27		59-3082208	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
28		28		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip Country		Zip Country		Trust Fund Contribution <input type="checkbox"/>	
25		29		30	

9. Name and Address of Current Registered Agent

WHITE, SANDRA K  
 608 VENEER DRIVE  
 ALTAMONTE SPRINGS FL 32714

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

I, Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE		(NOTE: Registered Agent signature required when reinstating)		DATE	
Signature, typed or printed name of registered agent and title if applicable.					
1. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
LE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ME	WHITED, M.D.	1.2 NAME			
REET ADDRESS	2347 VERSAILLES AVE.	1.3 STREET ADDRESS			
Y-ST-ZIP	WINTER PARK FL	1.4 CITY-ST-ZIP			
LE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ME	WHITE, MARC	2.2 NAME			
REET ADDRESS	608 VENEER DR	2.3 STREET ADDRESS			
Y-ST-ZIP	ALTAMONTE SPRINGS FL	2.4 CITY-ST-ZIP			
LE	PD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ME	WHITE, SANDRA K	3.2 NAME			
REET ADDRESS	608 VENEER DR	3.3 STREET ADDRESS			
Y-ST-ZIP	ALTAMONTE SPRGS FL	3.4 CITY-ST-ZIP			
LE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ME		4.2 NAME			
REET ADDRESS		4.3 STREET ADDRESS			
Y-ST-ZIP		4.4 CITY-ST-ZIP			
LE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ME		5.2 NAME			
REET ADDRESS		5.3 STREET ADDRESS			
Y-ST-ZIP		5.4 CITY-ST-ZIP			
LE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ME		6.2 NAME			
REET ADDRESS		6.3 STREET ADDRESS			
Y-ST-ZIP		6.4 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 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, with all other like empowered.

SIGNATURE: *Sandra K White* REQUIRED 8/1/99 (407) 288-2047

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CR2E037 (5/99)