FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # N9300005637 (4)

QUEST FOR PEACE INTERNATIONAL, INC.

Principal Place of Business Mailing Address								1 (SALIS) SIS ISING SAID SAID SAID SAID SAID SAID SAID SAID		
350 ROCKHILL CT. MARCO ISLAND FL 33937				P.O. BOX 627 MARCO ISLAND FL 33969						
								3. Date Incorporated or Qualified 3a. Date of Last Report 04/21/1995		
2. Principal Pla	ace of Busine	ess	2a.	Mailing Address				4. FEI Number Applied For		
21			26					65-0548018 Not Applicable	e	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State				City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country			28	Zip Country				Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,		
— · · · —		25	29	30				Florida Statutes		
9. Name and Address of Curren								10. Name and Address of New Registered Agent		
						81	Name	6		
PETTERSEN, KJELL W						82	Street A	et Address (P.O. Box Number is Not Acceptable)	_	
350 ROCKHILL CT.									_	
MARCO	island fl	. 33937				83				
						84	City	FL 85 Zip Code		
11. Pursuant 1	to the provisi	ons of Sections 617.05	02 and 61	7.1508, Florida Sta	itutes, the a	above-r	named co	corporation submits this statement for the purpose of changing its registered office is board of directors. I hereby accept the appointment as registered agent. I am	ce	
or register familiar wi	ed agers, or th, aga acce	ot the obligations of S	orida. Suci action 617.	n change was aum .0503/Florida Statu	ntek.	ie corp	oradori S	as board of directors. Thereby accept the appointment as registered agent. Fam.		
SIGNATURE 2	/Ju	1 Mu	7	1 asser	ut.			5/20/76	_ '	
12.	Sy lature, typed	or printed name of registered a OFFICERS				ered Agen	t signature re	re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	OFFICENCE	AND DINE	DELETE		.1 TITLE		Change Addition	<u> </u>	
NAME		SEN, KJELL W			1	2 NAME				
STREET ADDRESS		CKHILL CT.			1	.3 STREET	ADDRESS	S .		
CITY-ST-ZIP	MARCO	ISLAND FL			1	4 CITY-S	T-ZIP			
TITLE	SD			[[]]JELETE	2	1 TITLE		☐ Change ☐ Addition	1	
NAME		r, roger rev.			2	2 NAME				
STREET ADDRESS		ADOW RIDGE CT.			2	.3 STREET	ADDRESS	es		
CITY-ST-ZIP		ISLAND FL				4 CITY-	ST-ZIP	Change El Addition		
TITLE	TD	3 14NF		DELETE		I.1 TITLE		☐ Change ☐ Addition	F	
NAME	HITTLE	i, Jane Ssau Road				I.2 NAME	ADDRESS	ne l		
STREET ADDRESS		ISLAND FL			1	I.3 STREET I.4. CITY-!).»		
CITY-ST-ZIP TITLE	VD	NUMBER OF THE PERSON OF THE PE		Dettelle		i.4. Git 1-3 i.1 Title	a1 - KII	☐ Change ☐ Addition	<u> </u>	
NAME	FARREI	.L. DES				. 2 NAME				
STREET ADDRESS		ARLIN COURT					ADDRESS	55		
CITY-ST-ZIP		ISLAND FL			4	4 CITY - S	ST - ZIP		 .	
TITLE	D			DELETE	5	1 TITLE		☐ Change ☐ Addition	n	
NAME		, JOHN			5	2 NAME				
STREET ADDRESS		LYNESIA COURT			5	3.3 STREET	ADDRESS	ss		
CITY-ST-ZIP	MARCO	ISLAND FL				5.4 CITY - 5	ST-ZIP	☐ Change ☐ Addition		
TITLE				DELETE		S.1 TITLE		Change Addition	.1	
NAME						5.2 NAME				
STREET ADDRESS					6	3 STREET	ADDRESS	SS		

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)(k), 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: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mary Jane Fitter

4/10/96 Daytime Phone # RSE037 (12/95)

E REBUITER BOY COLOR COLOR BERG BEGG SUBMI BROWN DELL BALLE BALLE COLOR