

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000083279

FILED
Apr 03, 2008
Secretary of State

Entity Name: THE QUESTAMENTE NETWORK, INC.

Current Principal Place of Business:

2513 W. HILLSBOROUGH AVENUE
SUITE 201
TAMPA, FL 33614

New Principal Place of Business:

4104 CAUSEWAY VISTA DRIVE
TAMPA, FL 33615

Current Mailing Address:

2513 W. HILLSBOROUGH AVENUE
SUITE 201
TAMPA, FL 33614

New Mailing Address:

PO BOX 20883
TAMPA, FL 33622

FEI Number: 76-0834748

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHIFINO, WILLIAM J ESQ.
ONE TAMPA CITY CENTER, STE. 3200
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CHITESTER, DAVID D
Address: 2513 W. HILLSBOROUGH AVE., SUITE 201
City-St-Zip: TAMPA, FL 33614

Title: ST () Delete
Name: CHITESTER, KATHLEEN
Address: 2513 W. HILLSBOROUGH AVE., SUITE 201
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHITESTER, DAVID D
Address: 4104 CAUSEWAY VISTA DRIVE
City-St-Zip: TAMPA, FL 33615

Title: ST (X) Change () Addition
Name: CHITESTER, KATHLEEN
Address: 4104 CAUSEWAY VISTA DRIVE
City-St-Zip: TAMPA, FL 33615

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID D CHITESTER

PD

04/03/2008

Electronic Signature of Signing Officer or Director

Date