

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000092739

1. Entity Name

QUEST OF QUIETUDE VENTURES, INC.



Principal Place of Business

3615 BOCA CIEGA DRIVE  
APT. 112  
NAPLES, FL 34112

Mailing Address

3823 TAMiami TrL E  
PMB 247  
NAPLES, FL 34112 US

**FILED**  
**Jun 19, 2008 08:00 AM**  
**Secretary of State**



06022008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

43-1035876

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

FISHER, GERALDINE F  
3615 BOCA CIEGA DRIVE  
APT. 112  
NAPLES, FL 34112

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSD  
FISHER, GERALDINE F  
3615 BOCA CIEGA DR., APT. 112  
NAPLES, FL 34112

TITLE  
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CITY-ST-ZIP

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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

U00000953263  
06/19/08-80001-028 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

*Geraldine Fisher* PRES  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-9-08

Date

618-578-9673  
Daytime Phone #