

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P99000048157



1. Entity Name  
QUO VADIS TOURS, INC.

Principal Place of Business  
15756 CORAL VINE LANE  
FORT MYERS, FL 33905

Mailing Address  
15756 CORAL VINE LANE  
FORT MYERS, FL 33905

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04122006 Chg-P CR2E034 (11/05)

4. FEI Number  
65-0922928

Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TATUM, ROBERT  
15756 CORAL VINE LANE  
FORT MYERS, FL 33905

Name *JACQUELINE MCKELVIE*

Street Address (P.O. Box Number is Not Acceptable)

*15756 CORAL VINE LANE*

City

*FORT MYERS*

FL *33905*

Zip Code

7. Name and Address of New Registered Agent

SIGNATURE

*Jacqueline McKelvie*

4-12-06

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution.

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D  
NAME TATUM, ROBERT  
STREET ADDRESS 15756 CORAL VINE LANE  
CITY-ST-ZIP FORT MYERS, FL 33905

TITLE PS  
NAME TATUM, ROBERT  
STREET ADDRESS 15756 CORAL VINE LANE  
CITY-ST-ZIP FORT MYERS, FL 33905

TITLE VPT  
NAME TATUM, ROBERT  
STREET ADDRESS 15756 CORAL VINE LANE  
CITY-ST-ZIP FORT MYERS, FL 33905

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change  Addition  
P/V/T/S/D  
JACQUELINE MCKELVIE  
15756 CORAL VINE LANE  
FORT MYERS, FL 33905

Change  Addition

Change  Addition

Change  Addition

Change  Addition

Change  Addition

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.

*Jacqueline McKelvie*  
*JACQUELINE MCKELVIE*

4-12-06

(239) 693-8485  
(239) 634-1088 (cell)