2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State
04-12-2004 90304 023 ***150.00

DOCUMENT# P99000109995

1. EntityName
QUANTERAENERGYRESOURCES,INC.

94049427

PrincipalPlaceofBusiness	MailingAddress
CR 25 A LAKE CITY, FL 32056	P.O. BOX 7406 LAKE CITY, FL 32055

03042004 NoChg-P CR2E034(10/03)

DO NOT WRITE IN THIS SPACE

4. FEINumber 59-3721458 ☐ AppliedFor ☐ NotApplicable

5. CertificateofStatusDesired ☐ **$8.75** Additional FeeRequired

6. NameandAddressofCurrentRegisteredAgent

ANDERSON,JOHNS
9248NW26THAVE
GAINESVILLE,FL32606

DO NOT WRITE IN THIS SPACE

8. Theabovenamedentitysubmitsthisstatementforthepurposeofchangingitsregisteredofficeorregisteredagent,orboth,intheStateofFlorida.Iamfamiliarwith,andaccept theobligationsofregisteredagent.

SIGNATURE _____ 4-6-04
Signature,typeorprintednameofregisteredagentandtitleifapplicable. (NOTE:RegisteredAgentsignaturerequiredwhenre instating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. ElectionCampaignFinancing TrustFundContribution. ☐ **$5.00** MayBe AddedtoFees

10. OFFICERSANDDIRECTORS

TITLE	PS
NAME	ANDERSON,JOHNS
STREETADDRESS	1720S.W.78THST.
CITY-ST-ZIP	GAINESVILLE,FL32607
TITLE	VT
NAME	BLATTER,C.LEE
STREETADDRESS	~~RT.13,BOX2025~~ 3820 NW Hemitobow St #102
CITY-ST-ZIP	LAKECITY,FL32055
TITLE	S
NAME	ANDERSON,CORAL
STREETADDRESS	1720SW78THST
CITY-ST-ZIP	GAINESVILLE,FL32607
TITLE	T
NAME	BLATTER,ANGELA
STREETADDRESS	~~RT.13,BOX2025~~ 3820 NW Hemitobow St #102
CITY-ST-ZIP	LAKECITY,FL32055
TITLE	
NAME	
STREETADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREETADDRESS	
CITY-ST-ZIP	

PAID
CK NO 1387 DATE 4/6/04
$150.00

DO NOT WRITE IN THIS SPACE

12. Ihereby 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 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: _____ 4-6-04
SIGNATUREANDTYPEDORPRINTEDNAMEOFSIGNINGOFFICERORDIRECTOR Date DaytimePhone#