2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2007 8:00 am
Secretary of State
03-29-2007 90028 043 ****61.25

DOCUMENT # 700005

1. Entity Name
PEACE RIVER AND PALM SHORES SOCIAL CLUB, INC.

400047 00

Principal Place of Business	Mailing Address
29075 RIVERVIEW LANE PUNTA GORDA, FL 33982-8535	29075 RIVERVIEW LANE PUNTA GORDA, FL 33982-8535

03132007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COY, EUGENE 285 EVERGREEN STREET PUNTA GORDA, FL 33982	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P STACEY, TOM 29136 ORVA DRIVE PUNTA GORDA, FL 33982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Eugene Coy 275 Evergreen St Punta Gorda, Fl 33982	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ROBINSON, JIM 398 OMEN PUNTA GORDA, FL 33982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Rosalynn Gould 58 Colville Dr Punta Gorda, Fl 33982	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T RHODES, RICK 459 RIDGECREST DR PUNTA GORDA, FL 33982	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Rick Rhodes 459 Ridgecrest Dr Punta Gorda, Fl 33982	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S RUSSIAN, BERNARDINE 215 SUMMERSET DRIVE PUNTA GORDA, FL 33982	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Bernardine Russian 215 summerset Dr Punta Gorda, Fl 33982	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALDRICH, BUD 28411 COCO PALM PUNTA GARDA, FL 33982	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Cindy Coutts 28539 Sabal Palm Dr Punta Gorda, Fl 33982	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Andrea Herigodt 29173 Boyce Rd Punta Gorda, Fl 33982	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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 617, 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: Rosalynn Gould (Rosalynn Gould) 3-26-07 941-505-9830
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #