

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756334

FILED  
May 10, 2010  
Secretary of State

**Entity Name:** PEACE RIVER BAPTIST ASSOCIATION, INC.

**Current Principal Place of Business:**

4630 SOUTH FAIRWAY DR.  
PUNTA GORDA, FL 33982

**New Principal Place of Business:**

**Current Mailing Address:**

4630 SOUTH FAIRWAY DR.  
PUNTA GORDA, FL 33982

**New Mailing Address:**

**FEI Number:** 59-2318011      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

BROWN, FLETCHER  
124 N BREVARD AVE  
ARCADIA, FL 33821      US

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

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** MOWRY, MIKE REV  
**Address:** 6220 GOLF COURSE BLVD  
**City-St-Zip:** PUNTA GORDA, FL 33982

**Title:** SD  
**Name:** LEE, NANCY J  
**Address:** 4630 FAIRWAY DRIVE SOUTH  
**City-St-Zip:** PUNTA GORDA, FL 33982

**Title:** TD  
**Name:** MURRAY, JOYCE  
**Address:** 459 GILL STREET  
**City-St-Zip:** PUNTA GORDA, FL 33950

**Title:** VPD  
**Name:** SMITH, MARK REV  
**Address:** 18375 COCHRAN BLVD  
**City-St-Zip:** PORT CHARLOTTE, FL 33948

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NANCY LEE

SD

05/10/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date