

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90114 046 ****61.25

DOCUMENT # N42918

1. Entity Name

PEACE RIVER ENGINEERING SOCIETY, INC.



Principal Place of Business

P.O. BOX 510461
PUNTA GORDA FL 33951

Mailing Address

P.O. BOX 510461
PUNTA GORDA FL 33951

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0254029**

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

PASSMORE, SCOTT G PE
1620 PLACIDA ROAD
D
ENGLEWOOD FL 34223

Name **WICKERSON, ANDREW J. PE**

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

1714 FESSLER STREET

City

ENGLEWOOD

FL

Zip Code

34223

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

Andrew J. Wickerson **ANDREW J. WICKERSON, SECRETARY 4/8/2003**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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 **DP** ☐ Delete
NAME **DENK, TERRY L PE**
STREET ADDRESS **900 PINE STREET, SUITE 225**
CITY-ST-ZIP **ENGLEWOOD FL 34223**

TITLE **DP** ☒ Change ☐ Addition
NAME **ARRINGTON, BARTLEY E. PE**
STREET ADDRESS **18501 MURDOCK CIRCLE, SUITE 404**
CITY-ST-ZIP **PORT CHARLOTTE, FL 33948**

TITLE **DV** ☐ Delete
NAME **ARRINGTON, BARTLEY E PE**
STREET ADDRESS **18501 MURDOCK CIRCLE, SUITE 404**
CITY-ST-ZIP **PORT CHARLOTTE, FL 33948**

TITLE **DV** ☒ Change ☐ Addition
NAME **NEWMAN, BEN PE**
STREET ADDRESS **1001 SARASOTA CENTER BLVD**
CITY-ST-ZIP **SARASOTA, FL 33983**

TITLE **DT** ☐ Delete
NAME **STANDER, RICHARD R PE**
STREET ADDRESS **P.O. BOX 630**
CITY-ST-ZIP **PLACIDA FL 33946**

TITLE **DT** ☒ Change ☐ Addition
NAME **STANDER, RICHARD R. PE**
STREET ADDRESS **810 VIA TRIPOLI**
CITY-ST-ZIP **PUNTA GORDA, FL 33950**

TITLE **DS** ☐ Delete
NAME **PASSMORE, SCOTT G PE**
STREET ADDRESS **1620 PLACIDA RD, SUITE D**
CITY-ST-ZIP **ENGLEWOOD FL 34223**

TITLE **DS** ☒ Change ☐ Addition
NAME **WICKERSON, ANDREW J. PE**
STREET ADDRESS **1714 FESSLER STREET**
CITY-ST-ZIP **ENGLEWOOD, FL 34223**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby 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 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:

Andrew J. Wickerson **ANDREW J. WICKERSON, SECRETARY 4/8/2003 1941 475-5651**

CR2E037 (10/02)