## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## **DOCUMENT# 117924**

Entity Name: PEACE RIVER PACKING COMPANY

FILED Feb 27, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 221 W BROADWAY PO. BOX 816 FT. MEADE, FL 33841 US **New Mailing Address: Current Mailing Address:** 221 W BROADWAY PO. BOX 816 FT. MEADE, FL 33841 US FEI Number: 59-0601955 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BLACK, NLP 711 E BROADWAY FT MEADE, FL 33841 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition FORT, JR., RICHARD A D Name: Name: 500 NE 5TH ST Address: Address: City-St-Zip: FT MEADE, FL, FL 33841 US City-St-Zip: Title: PD Title: ( ) Delete () Change () Addition Name: BLACK, N.L. PD Name: 16 N. CLEVELAND AVE. Address: Address: FT. MEADE, FL 33841 US City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition JAHNA, FREDRIC JR DV Name: Name: 104 S RAII ROAD AVE Address: Address: City-St-Zip: AVON PARK, FL 33825 US City-St-Zip: Title: () Delete Title: () Change () Addition BEVIS, HUGH D Name: Name: Address: 812 8TH ST NE Address: City-St-Zip: FT MEADE, FL 33841 US City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition VARN, INEZ D Name: LEWIS, JOSEPH L Name: 120 N OAK AVE Address: 7375 REFLECTIONS LAKE DRIVE Address: FORT MEADE, FL 33841 US City-St-Zip: City-St-Zip: LAKELAND, FL 33813 US ( ) Delete Title: DST Title: () Change () Addition Name: BLACK, JR., LARRY DST Name: 1860 PINNACLE DRIVE Address: Address: City-St-Zip: City-St-Zip: LAKELAND, FL 33841 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: N. LARRY BLACK, JR. S 02/27/2009