## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 451261**

Title:

Name:

Address:

City-St-Zip:

FILED Jan 30, 2009 Secretary of State

Entity Name: PETER PAN, INC. **Current Principal Place of Business: New Principal Place of Business: 3576 RUBY ST** PALM BCH GRDNS, FL 33410 LIS **Current Mailing Address: New Mailing Address:** 2725 NE 54TH TRAIL OKEECHOBEE, FL 34972 US FEI Number: 59-1531375 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MURRAY, DON H 2725 NE 54TH TRAIL OKEECHOBEE, FL 34972 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PCD ( ) Delete Title: PCD (X) Change ( ) Addition MURRAY, DON H Name: Name: MURRAY, DON H 2725 NE 54TH TRAIL 2725 NE 54TH TRAIL Address: Address: City-St-Zip: OKEECHOBEE, FL 34972 City-St-Zip: OKEECHOBEE, FL 34972 STVD Title: STVD Title: () Delete (X) Change ( ) Addition MURRAY, PATRICIA, Name: Name: MURRAY, PATRICIA L 2725 NE 54TH TRAIL 2725 NE 54TH TRAIL Address: Address: OKEECHOBEE, FL 34972 City-St-Zip: City-St-Zip: OKEECHOBEE, FL 34972 ( ) Delete Title: VD Title: VD. (X) Change ( ) Addition HILL, KIMBERLY M. HILL, KIMBERLY . M Name: Name: 10298 ALLAMANDA BLVD 10298 ALLAMANDA BLVD Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: PALM BEACH GARDENS, FL 33410

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: DON H. MURRAY PRES 01/30/2009

() Delete

PALM BEACH GARDENS, FL 33410

10298 ALLAMANDA BLVD

HILL, WILLIAM F

() Change () Addition