

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725167

FILED
May 26, 2004
Secretary of State**Entity Name:** PEACE RIVER GOLF CONDOMINIUM NO 100 INC**Current Principal Place of Business:**220 N IDLEWOOD AVE
UNIT 208
BARTOW, FL 33830**New Principal Place of Business:**220 N IDLEWOOD AVE
UNIT 202
BARTOW, FL 33830**Current Mailing Address:**220 N IDLEWOOD AVE
UNIT 208
BARTOW, FL 33830**New Mailing Address:**220 N IDLEWOOD AVE
UNIT 202
BARTOW, FL 33830**FEI Number:** 59-2334029**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LOWERY, SCOTT C
220 N IDLEWOOD AVE
UNIT 208
BARTOW, FL 33830 US**Name and Address of New Registered Agent:**FOWLER, WILLIAM J
220 N IDLEWOOD AVE
UNIT 202
BARTOW, FL 33830 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: WILLIAM J FOWLER

05/26/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LOWERY, SCOTT
Address: 220 N IDLEWOOD, UNIT 208
City-St-Zip: BARTOW, FL 33830

Title: VP () Delete
Name: SMITH, JOAN
Address: 220 N. IDLEWOOD UNIT 205
City-St-Zip: BARTLOW, FL 33830

Title: D () Delete
Name: TUCKER, GERALD
Address: 220 N IDLEWOOD AVE UNIT 108
City-St-Zip: BARTOW, FL 33830

Title: ST () Delete
Name: FOWLER, WILLIAM J
Address: 220 N IDLEWOOD AVE UNIT 202
City-St-Zip: BARTOW, FL 33830

Title: P () Delete
Name: ANDERSON, TRACY
Address: 220 N. IDLEWOOD, UNIT 207
City-St-Zip: BARTOW, FL 33830

Title: D () Delete
Name: GUFFEY, KAREN
Address: 1250 SPRING COURT
City-St-Zip: BARTOW, FL 33830

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: TUCKER, ASHLEY
Address: 202 IDLEWOOD AVE. UNIT 206
City-St-Zip: BARTOW, FL 33830

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: WILLIAM J FOWLER

ST

05/26/2004

Electronic Signature of Signing Officer or Director

Date