

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002493

FILED  
Feb 17, 2009  
Secretary of State

Entity Name: THE PEACE ALLIANCE, INC.

## Current Principal Place of Business:

C/O HEART PHOENIX  
2603 NW 13TH ST, PMB 375  
GAINESVILLE, FL 32609

## Current Mailing Address:

C/O HEART PHOENIX  
2603 NW 13TH ST, PMB 375  
GAINESVILLE, FL 32609

## New Principal Place of Business:

1730 RHODE ISLAND AVE NW  
SUITE 712  
WASHINGTON, DC 20036

## New Mailing Address:

PO BOX 70095  
ROCHESTER HILLS, MI 48307

FEI Number: 30-0239440

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PHOENIX, HEART  
2603 NW 13TH ST, PMB 375  
GAINESVILLE, FL 32609 US

## Name and Address of New Registered Agent:

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: DS ( ) Delete  
Name: PHOENIX, HEART  
Address: 2603 NW 13TH ST, PMB 375  
City-St-Zip: GAINESVILLE, FL 32609

Title: DP ( ) Delete  
Name: ROBBINS, MICHAEL  
Address: 1735 GLAZIER DRIVE  
City-St-Zip: CONCORD, CA 94521

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DP (X) Change ( ) Addition  
Name: KIMMEL, JUDY  
Address: 351 COUNTYVIEW DRIVE  
City-St-Zip: MILL VALLEY, CA 94941

Title: MD ( ) Change (X) Addition  
Name: GREENE, WENDY  
Address: 5563 APRIL JOURNEY  
City-St-Zip: COLUMBIA, MD 21044

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

SIGNATURE: WENDY GREENE

MD

02/17/2009

Electronic Signature of Signing Officer or Director

Date