2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005 8:00 am
Secretary of State
01-10-2005 90022 027 ***150.00

DOCUMENT # H66177

1. Entity Name
PEACE RIVER WARRIORS, INC.

Principal Place of Business	Mailing Address
3812 BERMUDA COURT PUNTA GORDA, FL 33950	3812 BERMUDA COURT PUNTA GORDA, FL 33950

01062005 Chg-P CR2E034 (10/03)

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 59-2635269 ☐ 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
JAMES, BONELLO 3812 BERMUDA CT. PUNTA GORDA, FL 33950	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 James Bonello James Bonello 1/7/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	VD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	~~RATLIFF, TOM~~	NAME	
STREET ADDRESS	1321 VIA MILANESE	STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA, FL 33950	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	RASMUSSEN, WAYNE	NAME	
STREET ADDRESS	423 SAN CARLO DR.	STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA, FL 33950	CITY-ST-ZIP	
TITLE	SD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	FERO, TOM	NAME	
STREET ADDRESS	3378 DECK ST.	STREET ADDRESS	
CITY-ST-ZIP	PORT CHARLOTTE, FL 33981	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	~~BONELLO, JAMES~~	NAME	
STREET ADDRESS	3312 BERMUTA CT.	STREET ADDRESS	NOO NEW
CITY-ST-ZIP	PUNTA GORDA, FL 33950	CITY-ST-ZIP	
TITLE	D ☑ Delete	TITLE	☑ Change ☐ Addition
NAME	KENNETH, KAYSEE	NAME	PHILIP THOMPSON
STREET ADDRESS	2822 C-10 GRANDE DR	STREET ADDRESS	24141 REDFISH COVE DR.
CITY-ST-ZIP	PUNTA GORDA, FL 33950	CITY-ST-ZIP	PUNTA GORDA FL 33955
TITLE	PD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	TAMBASCO, ERNIE	NAME	
STREET ADDRESS	118 HIBISCUS DR.	STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA, FL 33950	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 607, 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: James Bonello 1/7/05 941-575-0009
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #