FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N01802 (0)

1. Corporation Name

PENINSULA PLAYERS, INC.

Principal Place of Business	Mailing Address
%ALFRED E. RICHTER 1436 ROSADA WAY FORT MYERS FL 33901	%ALFRED E. RICHTER 1436 ROSADA WAY FORT MYERS FL 33901

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/07/1984
3a. Date of Last Report: 04/25/1994
4. FEI Number: 59-2505710 ☐ Applied For ☐ Not Applicable

	Principal Place of Business	Mailing Address
2. / 2a.	21 % ALFRED E RICHTER	26 % ALFRED E RICHTER
Suite, Apt. #, etc.	22 2801 JOHNSON AVE #9	27 2801 JOHNSON AVE #9
City & State	23 SAN LUIS OBISPO CA	28 SAN LUIS OBISPO CA
Zip / Country	24 93401 / 25 SAN LUIS OBISPO	29 93401 / 30 SAN LUIS OBISPO

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

RICHTER, AL
1436 ROSADA WAY
FT MYERS FL 33901

10. Name and Address of New Registered Agent

81 Name: DIANE WILKES / PENINSULA PLAYERS
82 Street Address (P.O. Box Number is Not Acceptable): 575 BAYSIDE DR
83
84 City: FORT MYERS FL 85 Zip Code: 33919

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Diane Wilkes — 4-23-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP RICHTER, ALFRED E. 1436 ROSADA WAY FORT MYERS FL	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	DP ALFRED E RICHTER 2801 JOHNSON AVE #9 SAN LUIS OBISPO CA 93401	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RICHTER, MARTHA P. 1436 ROSADA WAY FORT MYERS FL	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D MARTHA P RICHTER 2801 JOHNSON AVE #9 SAN LUIS OBISPO CA 93401	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILKES, DIANE 575 BAYSIDE DRIVE FT. MYERS FL	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DAN PERRY 575 BAYSIDE DR FT MYERS FL	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D DAN PERRY 575 BAYSIDE DR FT MYERS, FL 33919	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Alfred E. Richter — 4-23-95 — 805/547-1742
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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