

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007039

FILED  
Mar 15, 2009  
Secretary of State

Entity Name: PEACE RIVER POP WARNER CONFERENCE INC.

## Current Principal Place of Business:

18486 BRIGGS CIRCLE  
PT CHARLOTTE, FL 33948

## New Principal Place of Business:

## Current Mailing Address:

18486 BRIGGS CIRCLE  
PT CHARLOTTE, FL 33948

## New Mailing Address:

FEI Number: 65-0423472

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JONES, BELINDA  
18486 BRIGGS CIRCLE  
PT CHARLOTTE, FL 33948 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: P ( ) Delete  
Name: JONES, BELINDA  
Address: 18486 BRIGGS CIRCLE  
City-St-Zip: PT CHARLOTTE, FL 33948

Title: VP ( ) Delete  
Name: ELG, MIKE  
Address: 4144 NE 9TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33909

Title: T ( ) Delete  
Name: RILEY, KRISTINE M  
Address: 11433 CLAGGETT AVENUE  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: SD ( ) Delete  
Name: WILSON, KELLY  
Address: 2630 NW 26TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33993

Title: S ( ) Delete  
Name: SCHWEITZER, TAMMI  
Address: 20521 PINETREE LANE  
City-St-Zip: ESTERO, FL 33928

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change ( ) Addition  
Name: SIMPSON, SHIRLEY  
Address: 1847 MORENO AVENUE  
City-St-Zip: FORT MYERS, FL 33901

Title: SD (X) Change ( ) Addition  
Name: JONES, JASON  
Address: 18486 BRIGGS CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33948

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

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: BELINDA A. JONES

PRES

03/15/2009

Electronic Signature of Signing Officer or Director

Date