## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Sep 18, 2008 DOCUMENT# N08873 Secretary of State

Entity Name: PEACE RIVER CENTER PROPERTIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1239 EAST MAIN STREET BARTOW, FL 33830

**Current Mailing Address: New Mailing Address:** 

PO BOX 1559

BARTOW, FL 338311559

FEI Number: 59-2527684 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

KILEY, MARY LU SIERRA, J GILBERT

829 WOODWARD STREET 4187 AÚDUBON OAKS CIRCLE LAKELAND, FL 33803 APT. #204

LAKELAND, FL 33809 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: J. GILBERT SIERRA 09/18/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition MILLER, RICHARD J LANGFORD, MARY K Name: Name:

3912 CANYON LAKE POINT Address: 1250 SCOTTSLAND DRIVE Address: City-St-Zip: LAKELAND, FL 33813 US City-St-Zip: LAKELAND, FL 33813 US

Title: ( ) Delete Title: () Change () Addition

Name: REED, STANLEY B Name: Address: 100 SOUTH KENTUCKY AVE. #230 Address: City-St-Zip: LAKELAND, FL 33801 US City-St-Zip:

Title: () Delete Title: () Change () Addition

WEED, EDWARD G Name: Name: 5015 SOUTH FLORIDA AVE #101 Address: Address: City-St-Zip: LAKELAND, FL 33813 US City-St-Zip:

Title: VΡ ( ) Delete Title: () Change () Addition

Name: PUTNAM, ABEL A Name: POST OFFICE BOX 3545 Address: Address: City-St-Zip: LAKELAND, FL 338023545 US City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

LANGFORD, MARY K SIERRA, J GILBERT Name: Name:

1250 SCOTTSLAND DRIVE 4187 AUDUBON OAKS CIRCLE, #204 Address: Address:

City-St-Zip: LAKELAND, FL 33813 US City-St-Zip: LAKELAND, FL 33809

Title: (X) Delete Title: () Change () Addition

KILEY, MARY LU Name: Name: Address: 829 WOODWARD STREET Address: LAKELAND, FL 33803 US City-St-Zip: 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: MARY KAY LANGFORD D 09/18/2008