

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19068

FILED
Apr 24, 2007
Secretary of State

Entity Name: PEOPLES NETWORK, INC.

Current Principal Place of Business:

571 NW MCCLURG CT.
WHITE SPRINGS, FL 320967308 US

New Principal Place of Business:

Current Mailing Address:

571 NW MCCLURG CT.
WHITE SPRINGS, FL 320967308 US

New Mailing Address:

FEI Number: 59-2776487 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARDER, CHARLES EDWARD
571 N.W. MCCLURG CT.
WHITE SPRINGS, FL 320967308 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: PTSD () Delete
Name: HARDER, CHARLES E.,
Address: 571 NW MCCLURG CT.
City-St-Zip: WHITE SPRINGS, FL 32096 US

Title: D () Delete
Name: LEMPert, LAWRENCE A
Address: 1601 W. SLIGH AVE.
City-St-Zip: TAMPA, FL US

Title: D () Delete
Name: JOCOBY, NOEL D
Address: 3006 OAK HILL ST.
City-St-Zip: LAKE CITY, FL 32025 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES E. HARDER

PTSD

04/24/2007

Electronic Signature of Signing Officer or Director

_____ Date