

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N93000002095

1. Entity Name
PEOPLE ENGAGED IN ACTIVE COMMUNITY EFFORTS,
INC.



FILED

07 SEP 24 AM 9:32

CLERK OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
96 EAST 30 STREET
SUITE B
RIVIERA BEACH, FL 33404 US

Mailing Address
96 EAST 30 STREET
SUITE B
RIVIERA BEACH, FL 33404 US

2. Principal Place of Business - No P.O. Box #
301 1st Ave. South
Suite, Apt. #, etc.

3. Mailing Address
301 1st Ave. South
Suite, Apt. #, etc.



05142007 Chg-NP 90005 009 \$61.25
CR2E037 (12/06)

City & State
Lake Worth, FL
Zip
33460
Country
USA

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Lake Worth, FL
Zip
33460
Country
USA

4. FEI Number
65-0416691
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DUNCOMBE, DONALD REV
96 EAST 30 STREET
SUITE B
RIVIERA BEACH, FL 33404

7. Name and Address of New Registered Agent

Name Rev. Donald Duncombe
Street Address (R.O. Box Number is Not Acceptable)
301 1st Ave. South
City Lake Worth FL Zip Code 33460

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

Filing Fee is \$61.25
Due by September 14, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	O/D	Delete
NAME WALKER E. LIONEL REV		☒
STREET ADDRESS 518 18 STREET		
CITY-ST-ZIP WEST PALM BEACH, FL 33401		
NAME DUNCOMBE, DONALD REV		☐
STREET ADDRESS 2600 AVE H		
CITY-ST-ZIP RIVIERA BEACH, FL 33404		
NAME LYLES, LORRAINE		☒
STREET ADDRESS 431 WEST 36 ST		
CITY-ST-ZIP RIVIERA BEACH, FL 33404		
NAME FEACHER, MARY		☐
STREET ADDRESS 1233 WEST 26 CRT		
CITY-ST-ZIP RIVIERA BEACH, FL 33404		
NAME JOHNSON, WANDA		☒
STREET ADDRESS P O BOX 010739		
CITY-ST-ZIP RIVIERA BEACH, FL 33404		
NAME WILLIAMS, JACQUELYN		☒
STREET ADDRESS 1409 13 ST		
CITY-ST-ZIP WEST PALM BCH, FL 33401		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Change	Addition
NAME John D'Mello	☐	☒
STREET ADDRESS 345 S. Military Trail		
CITY-ST-ZIP West Palm Beach, FL 33415		
NAME Rev. Donald Duncombe	☒	☐
STREET ADDRESS 2600 Avenue H		
CITY-ST-ZIP Riviera Beach, FL 33404		
NAME Rev. Alex Boss / V	☐	☒
STREET ADDRESS 4771 Pine Knott Lane		
CITY-ST-ZIP West Palm Beach, FL 33417		
NAME Mary Feacher	☒	☐
STREET ADDRESS 1233 West 26th Court		
CITY-ST-ZIP Riviera Beach, FL 33404		
NAME Carla Manuel	☐	☒
STREET ADDRESS 210 7th Street Apt. 3		
CITY-ST-ZIP Lake Park, FL 33403		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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 617, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/26/07 561 882 0423