

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2008 08:00 AM
Secretary of State

DOCUMENT # N94000001901

1. Entity Name

PEACEMAKERS, INC.



Principal Place of Business

2404 HARTSFIELD ROAD
TALLAHASSEE FL 32303

Mailing Address

P.O. BOX 38248
TALLAHASSEE FL 32315



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-3249269

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WHITAKER, ALPHONSO B
2404 HARTSFIELD ROAD
TALLAHASSEE FL 32303

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 is not required when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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 VD ☐ Delete
NAME HAYNES, WILLIE C
STREET ADDRESS 2985 RAYMOND DIEHL ROAD
CITY-STATE-ZIP TALLAHASSEE FL 32308

TITLE VD ☐ Delete
NAME WHITAKER, ANGELA G
STREET ADDRESS 2404 HARTSFIELD ROAD
CITY-STATE-ZIP TALLAHASSEE FL 32303

TITLE TD ☐ Delete
NAME HOBBS, ALVIN
STREET ADDRESS 6523 RIVER GLEN DRIVE
CITY-STATE-ZIP RIVERDALE GA 30296

TITLE D ☐ Delete
NAME HOBBS, KIMBERLY
STREET ADDRESS 6523 RIVER GLEN DRIVE
CITY-STATE-ZIP RIVERDALE GA 30296

TITLE PD ☐ Delete
NAME WHITAKER, ALPHONSO B
STREET ADDRESS 2404 HARTSFIELD ROAD
CITY-STATE-ZIP TALLAHASSEE FL 32303

TITLE D ☐ Delete
NAME WHITAKER, TERRY L
STREET ADDRESS 155 CHURCHHILL CIRCLE
CITY-STATE-ZIP LEESBURG GA 31763

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 000000808517
CITY-STATE-ZIP 02/07/08-80047-023 61.25

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
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CITY-STATE-ZIP

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CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 prepare 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 of my current or former employment.

SIGNATURE: *Alphonso B. Whitaker* 1/25/08 422-1158