

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003422

FILED  
Apr 27, 2007  
Secretary of State

Entity Name: QUEEN OF PEACE RADIO, INC.

## Current Principal Place of Business:

14041 ATLANTIC BLVD.  
ATLANTIC BEACH, FL 32233 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 51585  
JACKSONVILLE, FL 322401585 US

## New Mailing Address:

FEI Number: 59-3397612

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAKOWSKI, RAYMOND E ESQ.  
PO BOX 551174  
JACKSONVILLE, FL 32255 US

## Name and Address of New Registered Agent:

MAKOWSKI, RAYMOND E ESQ.  
391 14TH AVE SOUTH  
JACKSONVILLE BEACH, FL 32250 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:

04/27/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CAGLE, PETER  
Address: 11559 HALETHORPE DR  
City-St-Zip: JACKSONVILLE, FL 32223

Title: D ( ) Delete  
Name: MILLER, RICHARD  
Address: 1695 SELVA MARINA DR  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D ( ) Delete  
Name: MAKOWSKI, RAYMOND  
Address: PO BOX 551174  
City-St-Zip: JACKSONVILLE, FL 32255

Title: PD ( ) Delete  
Name: WILLIAMS, CHRISTOPHER J  
Address: 405 SNAPPING TURTLE CT.  
City-St-Zip: ATLANTIC BCH., FL 32233

Title: D ( ) Delete  
Name: JAMES, JARBOE R  
Address: 2010 LAS BRISAS WAY W  
City-St-Zip: JACKSONVILLE, FL 32224

## 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:

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 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: CHRISTOPHER WILLIAMS

PD

04/27/2007

Electronic Signature of Signing Officer or Director

Date