

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Feb 16, 2004 08:00 AM
Secretary of State**

DOCUMENT # P92000005174

1. Entity Name
PEACEFUL ACRES PARK, INC.



Principal Place of Business
**34851 SR 54 W
SUITE 101
ZEPHYRHILLS, FL 33541 US**

Mailing Address
**34851 SR 54 W
SUITE 101
ZEPHYRHILLS, FL 33541 US**



01212004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3154703

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HILL, CARL D
34851 SR 54 W SUITE 101
ZEPHYRHILLS, FL 33541**

**DO NOT WRITE
IN THIS SPACE**

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 constituting)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WILD, JOHNNY
25520 OAKS BLVD
LAND O LAKES, FL 34639**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HILL, CARL D
34851 SR 54W SUITE 101
ZEPHYRHILLS, FL 33541**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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02/16/04-80175-017 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, 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 lines empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/04 *(813) 782-7705*
Date Daytime Phone #