FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
1995 APR 13 PM
FLORIDA

DOCUMENT # **P93000022693 (4)**

1. Corporation Name
PEACE CREEK TRADING COMPANY, INC.

Principal Place of Business	Mailing Address
29 FIFTH ST, NW WINTER HAVEN FL 33881 US	29 FIFTH ST, NW WINTER HAVEN FL 33881 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/24/1993
3a. Date of Last Report: 04/18/1994

2. Principal Place of Business
21: 222 EAST PINE ST.
22: Suite, Apt. #, etc.
23: City & State: LAKELAND FL
24: Zip: 33801
25: County: USA

2a. Mailing Address
26: 222 EAST PINE ST.
27: Suite, Apt. #, etc.
28: City & State: LAKELAND, FL
29: Zip: 33801
30: County: USA

4. FEI Number: 59-3181767 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SCULLY, BONNIE B.
29 FIFTH ST, NW
WINTER HAVEN FL 33881

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 222 EAST PINE ST.
83
84 City: LAKELAND FL 85 Zip Code: 33801

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Bonnie Scully BONNIE B. SCULLY 4.6.95
(Signature, typed or printed name of registered agent and the date signed) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☒ Change ☐ Addition
NAME	SCULLY, BONNIE B.	12 NAME	
STREET ADDRESS	~~29 FIFTH ST, NW~~	13 STREET ADDRESS	222 EAST PINE ST.
CITY ST ZIP	~~WINTER HAVEN FL~~	14 CITY ST ZIP	LAKELAND, FL 33801
TITLE	ST	21 TITLE	☒ Change ☐ Addition
NAME	SCULLY, DAVID M.	22 NAME	
STREET ADDRESS	~~29 FIFTH ST, NW~~	23 STREET ADDRESS	222 EAST PINE ST.
CITY ST ZIP	~~WINTER HAVEN FL~~	24 CITY ST ZIP	LAKELAND, FL 33801
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	000000145754U
CITY ST ZIP		34 CITY ST ZIP	-04/17/95--01001--007 ****208.75 ****208.75
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	TAN 4/14/95 ☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: David M. Scully DAVID M. SCULLY 4.6.95 (813) 686-5562
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR — Date — Daytime Phone #

0310200 CP