

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2008 08:00 A
Secretary of State

DOCUMENT # P99000087458

1. Entity Name
WINTER HAVEN PREMIER CENTER, INC.



Principal Place of Business

**3877 RECKER HWY
STE 2
WINTER HAVEN, FL 33880**

Mailing Address

**PO BOX 1103
WINTER HAVEN, FL 33882**



04102008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3602420

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**KEMP, BETTY E
1173 HWY. 540
WINTER HAVEN, FL 33880**

**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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	P/T
NAME	KEMP, BETTY E
STREET ADDRESS	1173 HWY. 540
CITY-ST-ZIP	WINTER HAVEN, FL 33882
TITLE	VP/S
NAME	TIBBETS, RONICA L
STREET ADDRESS	2675 CRYSTAL BEACH ROAD
CITY-ST-ZIP	WINTER HAVEN, FL 33880
TITLE	VP
NAME	BROWER, JESSICA K
STREET ADDRESS	11814 WINTER LAKE ROAD 315 Lancolate Drive
CITY-ST-ZIP	WINTER HAVEN, FL 33880
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.

SIGNATURE

[Handwritten Signature]

04/11/08

(863) 291-3877