

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2008 8:00 am
Secretary of State

02-07-2008 90018 043 ***150.00

DOCUMENT # P99000089017

1. Entity Name

PEACE RIVER VALLEY MONUMENT CO.



Principal Place of Business

163 N BREVARD AVE
ARCADIA FL 34265
30260 HOLLY ROAD
PUNTA GORDA, FL 33982

Mailing Address

P O BOX 1499
ARCADIA FL 34265

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

30260 HOLLY ROAD

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PUNTA GORDA, FL

City & State

4. FEI Number

59-3603192

Applied For

Not Applicable

Zip

33982

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/07)



6. Name and Address of Current Registered Agent

ROBARTS, THOMAS M
3043 SPENCER LANE
SARASOTA FL 34239

7. Name and Address of New Registered Agent

Name **RICHARD S. BUTTON**

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

30260 HOLLY ROAD

City **PUNTA GORDA**

FL

Zip Code

33982

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

Richard S. Button

2-3-08

Signature, typed or printed name of registered agent and the filer, if applicable.

(NOTE: Registered Agent signature required when reconstituting)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	V/D	<input type="checkbox"/> Delete
NAME	ROBARTS, THOMAS M	
STREET ADDRESS	3043 SPENCER LANE	
CITY- ST- ZIP	SARASOTA FL 34239	
TITLE	P	<input type="checkbox"/> Delete
NAME	BUTTON, RICHARD	
STREET ADDRESS	30260 HOLLY ROAD	
CITY- ST- ZIP	PUNTA GORDA FL 33982	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMAS M ROBARTS	
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY- ST- 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 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:

Richard S. Button

2-3-08

8637819704

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #