

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

CORPORATION,  
ANNUAL REPORT  
1995



SECRETARY OF STATE  
CORPORATION DIVISION

**APPROVED  
AND  
FILED**

95 MAY -1 PM 3:24

DOCUMENT # 736577 (8)

PEACE RIVER MAINTENANCE INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5000015084591  
=06/03/95--11071--005  
\*\*\*\*138.75 \*\*\*\*138.75  
DIRECT WRITE IN THIS SPACE

|                                                        |    |                                                        |    |
|--------------------------------------------------------|----|--------------------------------------------------------|----|
| 1 Previous Officer's Name                              |    | 2a Mailing Address                                     |    |
| LIVINGSTON STREET<br>P.O. BOX 2969<br>ARCADIA FL 33821 |    | LIVINGSTON STREET<br>P.O. BOX 2969<br>ARCADIA FL 33821 |    |
| 21                                                     | 22 | 23                                                     | 24 |
| 25                                                     | 26 | 27                                                     | 28 |
| 29                                                     | 30 |                                                        |    |

|                                                                                         |                                       |
|-----------------------------------------------------------------------------------------|---------------------------------------|
| 3. Date of Incorporation (or Address)                                                   | 3a. Date of Last Report               |
| 08/11/1976                                                                              | 07/01/1994                            |
| 4. FE Number                                                                            | Applied For                           |
| 59-2413352                                                                              | Not Applicable                        |
| 5. Certificate Number (State)                                                           | \$8.75 Additional Fee Required        |
| <input checked="" type="checkbox"/>                                                     |                                       |
| 6. Director Campaign Disclosure (Total Fees and Dividends)                              | \$5.00 May Be Added to Fees           |
| <input type="checkbox"/>                                                                |                                       |
| 7. Nonprofit with 9405 Status (Tax Exempt Status)                                       | \$68.75 Supplemental Fee Not Required |
| <input type="checkbox"/>                                                                |                                       |
| 8. Does corporation have liability for administrative costs for Florida Statute 607.013 |                                       |
| <input type="checkbox"/>                                                                |                                       |

9 Name and Address of Current Registered Agent  
**SPIEGEL, BILL  
1412 CARNAHAN AVENUE  
ARCADIA FL 33821**

10. Name and Address of New Registered Agent  
B1 Name  
B2 State Address of New Registered Agent  
**X 1919 N.W. GORTHILL DR.**  
B3  
B4 City **FL** B5 State

11. I, the undersigned, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am the authorized officer or director of the corporation. I understand that the information furnished herein is subject to public inspection and copying. I understand that the information furnished herein is subject to public inspection and copying. I understand that the information furnished herein is subject to public inspection and copying.

|                                                                |                                                                                                                     |
|----------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|
| 12                                                             | 13                                                                                                                  |
| VP<br>STONE, KEN<br>NORTH ROAD, ROUTE #4, BOX 82<br>ARCADIA FL | <input checked="" type="checkbox"/> <b>SHOW, ROBERT (NW)</b><br>4282 North Rd PO Box 2736<br>Arcadia, Fla 33821 (D) |
| VP<br>SPERRY, ELIOT W.<br>10160 SW 137 COURT<br>MIAMI FL       | <input checked="" type="checkbox"/> <b>SPERRY ELIOT W.</b><br>1999 NW Goat Hill St.<br>Arcadia, Fla 33821 (D)       |
| VP<br>CARAHER, MARY<br>509 RETTA ESPLANADE<br>PUNTA GORDA FL   | <input checked="" type="checkbox"/> <b>FARRENS MICHAEL</b><br>1442 NW FARRENS DR<br>ARCADIA, FL 33821 (D)           |
| VP<br>JONES, JOHN<br>4224 NORTH ROAD<br>ARCADIA FL             | <input checked="" type="checkbox"/> <b>JONES JOHN</b><br>4224 North Rd (NW)<br>ARCADIA, FL 33821 (D)                |
| T<br>SPIEGEL, BILL<br>142 CARNAHAN AVENUE<br>ARCADIA FL        | <input checked="" type="checkbox"/> <b>SPIEGEL BILL</b><br>1919 N.W. GORTHILL DR<br>Arcadia, Fla 33821 (D)          |
| S<br>MAXWELL, SUE ELLEN<br>4981 NORTH ROAD, NW<br>ARCADIA FL   | <input checked="" type="checkbox"/> <b>STONE, KEN</b><br>3945 NW North Rd<br>Arcadia, Fla 33821 (D)                 |

14. I, the undersigned, certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that I am the authorized officer or director of the corporation. I understand that the information furnished herein is subject to public inspection and copying. I understand that the information furnished herein is subject to public inspection and copying. I understand that the information furnished herein is subject to public inspection and copying.

SIGNATURE:   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
4-10-95 813-494-7612