

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000002555

**FILED**  
**Mar 18, 2020**  
**Secretary of State**  
**2846041670CC**

**Entity Name:** PEACE RIVER CENTER FOR WRITERS, INC.

**Current Principal Place of Business:**

26300 AIRPORT ROAD  
PUNTA GORDA, FL 33950

**Current Mailing Address:**

26300 AIRPORT ROAD  
PUNTA GORDA, FL 33950 US

**FEI Number:** 02-0590771

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PELOT, JOHN  
3506 SAINT FLORENT CT.  
PUNTA GORDA, FL 33950 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           HOUCK, DOUGLAS  
Address        566 WEST MARION AVE  
City-State-Zip: PUNTA GORDA FL 33950

Title           PRESIDENT  
Name           PELOT, JOHN  
Address        3506 SAINT FLORENT CT.  
City-State-Zip: PUNTA GORDA FL 33950

Title           DIRECTOR  
Name           PASCOE, LEONARD  
Address        526 RIDGEWOOD ST.  
City-State-Zip: PORT CHARLOTTE FL 33952

Title           DIRECTOR  
Name           LIND, STEVE  
Address        115 DARTMOUTH RD.  
City-State-Zip: VENICE FL 34293

Title           VP  
Name           ALBERTS, EMMA  
Address        3310 LOVELAND BLVD.  
                  UNIT 2103  
City-State-Zip: PORT CHARLOTTE FL 33980

Title           TREASURER  
Name           LUCAS, TIMOTHY  
Address        26300 AIRPORT ROAD  
City-State-Zip: PUNTA GORDA FL 33950

Title           DIRECTOR  
Name           PRITCHETT, ELIJAH  
Address        830 BURLAND ST.  
City-State-Zip: PUNTA GORDA FL 33950

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOHN PELOT

**PRESIDENT**

**03/18/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date