

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000002134

**Entity Name:** PEACE RIVER ASSISTANCE ALLIANCE, INC.**Current Principal Place of Business:**408 TAMIAMI TRAIL, UNIT 121  
PUNTA GORDA, FL 33950**Current Mailing Address:**408 TAMIAMI TRAIL, UNIT 121  
PUNTA GORDA, FL 33950 US**FEI Number:** 46-2200351**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HOGAN, ANGELA M.  
408 TAMIAMI TRAIL, UNIT 121  
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:** ANGELA M. HOGAN

04/23/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            HOGAN, ANGELA  
Address        408 TAMIAMI TRAIL, UNIT 121  
City-State-Zip: PUNTA GORDA FL 33950

Title            DIRECTOR  
Name            SHARP, RYAN  
Address        408 TAMIAMI TRAIL, UNIT 121  
City-State-Zip: PUNTA GORDA FL 33950

Title            DIRECTOR  
Name            HILSTON, DAVID  
Address        408 TAMIAMI TRAIL, UNIT 121  
City-State-Zip: PUNTA GORDA FL 33950

Title            SECRETARY  
Name            RUMREICH, MICHELLE  
Address        408 TAMIAMI TRAIL, UNIT 121  
City-State-Zip: PUNTA GORDA FL 33950

Title            TREASURER  
Name            MORRISSEY, LEW  
Address        408 TAMIAMI TRAIL, UNIT 121  
City-State-Zip: PUNTA GORDA FL 33950

Title            DIRECTOR  
Name            NIX, DANNY JR.  
Address        408 TAMIAMI TRAIL, UNIT 121  
City-State-Zip: PUNTA GORDA FL 33950

Title            DIRECTOR  
Name            NEWTON, BOB  
Address        408 TAMIAMI TRAIL, UNIT 121  
City-State-Zip: PUNTA GORDA FL 33950

Title            DIRECTOR  
Name            HUSSEY, CARRIE  
Address        408 TAMIAMI TRAIL, UNIT 121  
City-State-Zip: PUNTA GORDA FL 33950

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*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:** ANGELA M. HOGAN

PRESIDENT

04/23/2019

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                   DIRECTOR  
Name                 CUMMINGS, JAHA  
Address             408 TAMIAMI TRAIL, UNIT 121  
City-State-Zip:   PUNTA GORDA FL 33950

Title                   DIRECTOR  
Name                 BARRETT, DONNA  
Address             408 TAMIAMI TRAIL, UNIT 121  
City-State-Zip:   PUNTA GORDA FL 33950