

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 01, 2004  
Secretary of State**

DOCUMENT# N01802

Entity Name: PENINSULA PLAYERS, INC.

**Current Principal Place of Business:**

C/O ALFRED E. RICHTER  
2801 JOHNSON AVE. #9  
SAN LUIS OBISPO, CA 93401 US

**New Principal Place of Business:**

**Current Mailing Address:**

%ALFRED E. RICHTER  
2801 JOHNSON AVE., #9  
SAN LUIS OBISPO, CA 93401 US

**New Mailing Address:**

FEI Number: 59-2505710      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PERRY, DAN  
575 BAYSIDE DRIVE  
FORT MYERS, FL 33919 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: RICHTER, ALFRED E.,  
Address: 1436 ROSADA WAY  
City-St-Zip: FORT MYERS, FL

Title: D ( ) Delete  
Name: RICHTER, MARTHA  
Address: 2801 JOHNSON AVE., #9  
City-St-Zip: SAN LUIS OBISPO, CA

Title: D ( ) Delete  
Name: WILKES, DIANE,  
Address: 575 BAYSIDE DRIVE  
City-St-Zip: FT. MYERS, FL

Title: D ( ) Delete  
Name: PERRY, DAN  
Address: 575 BAYSIDE DRIVE  
City-St-Zip: FT. MYERS, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: RICHTER, ALFRED E.,  
Address: 2801 JOHNSON AVENUE #9  
City-St-Zip: SAN LUIS OBISPO, CA

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALFRED RICHTER

D/P

05/01/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date