## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01802

Entity Name: PENINSULA PLAYERS, INC.

**Current Principal Place of Business:** 

C/O ALFRED E. RICHTER 5540 W FIFTH ST. #38 OXNARD, CA 93035

**Current Mailing Address:** 

%ALFRED E. RICHTER 5540 W FIFTH ST #38 OXNARD, CA 93035 US

FEI Number: 59-2505710 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PERRY, DAN 575 BAYSIDE DRIVE FORT MYERS, FL 33919 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

FILED May 07, 2014

**Secretary of State** 

CC4681264411

## Officer/Director Detail:

Title DP Title D

NameRICHTER, ALNameRICHTER, MARTHAAddress5540 W FIFTH ST #38Address5540 W FIFTH ST #38City-State-Zip:OXNARD CA 93035City-State-Zip:OXNARD CA 93035

Title D Title D

Name WILKES,, DIANE Name PERRY, DAN

Address 15206 IONA LAKES DRIVE Address 575 BAYSIDE DRIVE

City-State-Zip: FT. MYERS FL 33908 City-State-Zip: FT. MYERS FL 33919

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: ALFRED E RICHTER

PRESIDENT/RESIDENT DIRECTOR

05/07/2014