

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41213

FILED  
Jun 23, 2008  
Secretary of State

Entity Name: PEOPLE FOR PROTECTING PEACE RIVER, INC.

**Current Principal Place of Business:**

4224 SOLOMON ROAD  
ONA, FL 33865 US

**New Principal Place of Business:**

**Current Mailing Address:**

4224 SOLOMON ROAD  
ONA, FL 33865 US

**New Mailing Address:**

PO BOX 155  
WAUCHULA, FL 33873 US

FEI Number: 65-0241208      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MADER, DENNIS L  
4224 SOLOMON ROAD  
ONA, FL 33865 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: PTD ( ) Delete  
Name: MADER, DENNIS L  
Address: 4224 SOLOMON ROAD  
City-St-Zip: ONA, FL 33865

Title: DVP ( ) Delete  
Name: MURRAY, PATTY  
Address: 2616 BOYD COWART RD  
City-St-Zip: WAUCHULA, FL 33873

Title: D ( ) Delete  
Name: KIRKLAND, FRANK  
Address: 3846 FUSSELL ROAD  
City-St-Zip: BOWLING GREEN, FL 33824

Title: D ( ) Delete  
Name: BEHRENS, ALAN  
Address: 1719 SHANANDOAH ST  
City-St-Zip: WIMAUMA, FL 33598

Title: D ( ) Delete  
Name: MCCLELLAN, DONALD S  
Address: 3992 FUSSELL ROAD  
City-St-Zip: BOWLING GREEN, FL 33824

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

Title: PD (X) Change ( ) Addition  
Name: MADER, DENNIS L  
Address: 4224 SOLOMON ROAD  
City-St-Zip: ONA, FL 33865

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

Title: DT (X) Change ( ) Addition  
Name: MCCLELLAN, BONNY  
Address: 3992 FUSSELL ROAD  
City-St-Zip: BOWLING GREEN, FL 33824

Title: D (X) Change ( ) Addition  
Name: CONNER, BRUCE  
Address: 1035 IRVING AVENUE  
City-St-Zip: BARTOW, FL 3423

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DENNIS MADER

P

06/23/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date