

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
-------------------------------------------------------	-----------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------

DOCUMENT # 715412 (3)
1. Corporation Name
TAVERNIER VOLUNTEER FIRE DEPARTMENT AND AMBULANC ECORP., INC.



Principal Place of Business 151 MARINE AVENUE POST OFFICE BOX 301 TAVERNIER FL 33070	Mailing Address 151 MARINE AVENUE POST OFFICE BOX 301 TAVERNIER FL 33070
--------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------

3. Date Incorporated or Qualified 10/14/1968	
4. FEI Number 23-7155875	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 25
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent
**BOCK, DONALD
151 MARINE AVE/P O BOX 301
189 OCEAN DR
TAVERNIER 33070**

10. Name and Address of New Registered Agent

61 Name
62 Street Address (P.O. Box Number is Not Acceptable)
63
64 City
65 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *[Signature]* **Same** DATE **01/23/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCPEAK, ROBERT	1.2 NAME	
STREET ADDRESS	194 CORAL AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	TAVERNIER FL	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GONZALEZ, BENEDICTO	2.2 NAME	
STREET ADDRESS	133 PACIFIC AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	TAVERNIER FL	2.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOCK, DONALD	3.2 NAME	
STREET ADDRESS	189 OCEAN DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	TAVERNIER FL	3.4 CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MATHER, JR. C	4.2 NAME	
STREET ADDRESS	122 SIOUX STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	TAVERNIER FL	4.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TOTH, GEORGE	5.2 NAME	SD
STREET ADDRESS	232 BUTTONWOOD LANE	5.3 STREET ADDRESS	Jeanette Banks
CITY-ST-ZIP	TAVERNIER FL	5.4 CITY-ST-ZIP	130 Coral Ave., Tavernier, FL 33070
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BLESSER, ROBERT	6.2 NAME	D
STREET ADDRESS	103500 OS HWY	6.3 STREET ADDRESS	Thomas Strobel
CITY-ST-ZIP	KEY LARGO FL	6.4 CITY-ST-ZIP	167 Coral Rd., Tavernier, FL 33070

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **Donald Bock** - **01/23/98** **3058529860**

CFR2E037 (10/97)