

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 731032

FILED
Oct 09, 2009
Secretary of State

Entity Name: OCEAN REEF VOLUNTEER FIRE DEPARTMENT INC.

Current Principal Place of Business:

110 ANCHOR DRIVE
KEY LARGO, FL 33037 US

New Principal Place of Business:

Current Mailing Address:

24 DOCKSIDE LANE
PMB 505
KEY LARGO, FL 33037 US

New Mailing Address:

FEI Number: 23-7411790 **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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DAVID RITZ

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: OLCOTT, EMERY
Address: 09 CARD SOUND RD
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: ROSE, LYNN
Address: 103 HARBOUR HOUSE
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: ASTBURY, PAUL MG
Address: 09 HALFWAY RD
City-St-Zip: KEY LARGO, FL 33037

Title: P () Delete
Name: RITZ, DAVID C
Address: 70 N BOUNTY LN
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: ALF, EDWARD
Address: 30465 SANCTUARY TERRACE
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: ROSE, LYNN
Address: 03 HARBOUR HOUSE
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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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 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: DAVID C. RITZ

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10/09/2009

Electronic Signature of Signing Officer or Director

Date