

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732681

FILED
Feb 16, 2011
Secretary of State

Entity Name: UNIT 16 & 17 VOLUNTEER FIRE DEPARTMENT, INC

Current Principal Place of Business:

217 KENNEDY AVE.
INTERLACHEN, FL 32148

New Principal Place of Business:

Current Mailing Address:

217 KENNEDY AVE.
P.O. BOX 606
INTERLACHEN, FL 32148 06

New Mailing Address:

FEI Number: 51-0191143 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HITCHNER, MERLE
104 KENNEDY AVE
INTERLACHEN, FL 32148 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: SD
Name: HITCHNER, MARY
Address: 104 KENNEDY AVE
City-St-Zip: INTERLACHEN, FL 32148

Title: P
Name: HITCHNER, MERLE
Address: 104 KENNEDY AVE
City-St-Zip: INTERLACHEN, FL 32148

Title: 1VP
Name: CRESSMAN, RICHARD
Address: POINTSIANNA DR
City-St-Zip: INTERLACHEN, FL 32148

Title: D
Name: GREENE, LARRY
Address: 907 CREAGER AVE
City-St-Zip: INTERLACHEN, FL 32148

Title: TD
Name: BERRY, JUANITA
Address: 227 O'FARRELL AVE
City-St-Zip: INTERLACHEN, FL 32148

Title: D
Name: BROWN, SHARON
Address: 402 SHIRLEY STREET
City-St-Zip: INTERLACHEN, FL 32148

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: JUANITA BERRY

TD

02/16/2011

Electronic Signature of Signing Officer or Director

Date