

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 30, 2001 8:00 am
Secretary of State

0010431

DOCUMENT # 752205

1. Entity Name

RIVERSIDE VOLUNTEER FIRE DEPARTMENT, INC.

03-30-2001 90330 044 ****61.25

Principal Place of Business

101 GAIL DRIVE
 SAN MATEO FL 32189

Mailing Address

U.S. HIGHWAY 17 SOUTH
 P. O. BOX 694
 SAN MATEO FL 32187

639357



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1967981

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FIELDS, ALAN B.
413 ST. JOHNS AVENUE
PALATKA FL

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: PD
 NAME: KIRBY, THELMA C Delete
 STREET ADDRESS: 110 CREEKSIDE ROAD
 CITY-ST-ZIP: SAN MATEO FL

TITLE: D Change Addition
 NAME: CURRY, ANITA
 STREET ADDRESS: 588 OLD SAN MATEO RD.
 CITY-ST-ZIP: SAN MATEO, FL 32187

TITLE: SD Delete
 NAME: STREETS, ROSEMARY
 STREET ADDRESS: RT 1, BOX 130A
 CITY-ST-ZIP: SAN MATEO FL 32189

TITLE: SD Change Addition
 NAME: HARRIS, KEVIN
 STREET ADDRESS: 111 PALMLAND DR.
 CITY-ST-ZIP: SATSUMA, FL 32189

TITLE: VD Delete
 NAME: CURRY, ANITA
 STREET ADDRESS: 588 OLD SAN MATEO D
 CITY-ST-ZIP: SAN MATEO FL 32189

TITLE: VP Change Addition
 NAME: NELSON, SANDRA
 STREET ADDRESS: 223 CLEARWATER RD.
 CITY-ST-ZIP: SATSUMA, FL 32189

TITLE: D Delete
 NAME: WALDEN, THOMAS
 STREET ADDRESS: STAR RT 2, BOX 186
 CITY-ST-ZIP: SATSUMA FL 32189

TITLE: D Change Addition
 NAME: MOBLEY, R. ALAN
 STREET ADDRESS: 111 COOLWATER AVE.
 CITY-ST-ZIP: SATSUMA, FL 32189

TITLE: TD Delete
 NAME: KIRBY, DEBBIE
 STREET ADDRESS: STAR RT. 3, BOX 990
 CITY-ST-ZIP: SATSUMA FL 32189

TITLE: D Change Addition
 NAME: KIRBY, DEBBIE
 STREET ADDRESS: 111 PHEASANT RD
 CITY-ST-ZIP: SATSUMA, FL 32189

TITLE: D Delete
 NAME: STREETS, RAYMOND D
 STREET ADDRESS: RT 1., BOX 130A
 CITY-ST-ZIP: SAN MATEO FL 32189

TITLE: D Change Addition
 NAME: HARVEY, ALICE
 STREET ADDRESS: 319 SAN MATEO RD.
 CITY-ST-ZIP: SAN MATEO, FL 32187

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Belinda G. Styler* (904) 325-3420
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)