

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 26, 2004
Secretary of State**

DOCUMENT# 752410

Entity Name: RIMA RIDGE VOLUNTEER FIREFIGHTERS ASSO., INC.

Current Principal Place of Business:

New Principal Place of Business:

500 RODEO RD.
ORMOND BEACH, FL 32174 US

Current Mailing Address:

New Mailing Address:

500 RODEO ROAD
ORMOND BEACH, FL 32174

FEI Number: 28-0000528 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

Name and Address of New Registered Agent:

O'BRIEN, JOHN M TRES
500 RODEO RD
ORMOND BEACH, FL 32174 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARDONA, RAYMOND PRES
Address: 500 RODEO RD
City-St-Zip: ORMOND BEACH, FL 32174

Title: P (X) Change () Addition
Name: LONGFELLOW, JASON PRES
Address: 500 RODEO RD
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP () Delete
Name: BLANK, DAVID A VP
Address: 500 RODEO RD
City-St-Zip: ORMOND BEACH, FL 32174

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

Title: S () Delete
Name: RADIGAN, IRENE SECTY
Address: 500 RODEO RD
City-St-Zip: ORMOND BEACH, FL 32174

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

Title: TD () Delete
Name: O'BRIEN, JOHN M TRES
Address: 500 RODEO ROAD
City-St-Zip: ORMOND BEACH, FL 32174

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

Title: D () Delete
Name: JUBINSKY, WALTER D3
Address: 500 RODEO RD
City-St-Zip: ORMOND BEACH, FL 32174

Title: D (X) Change () Addition
Name: BLANK, MICHAEL D3
Address: 500 RODEO RD
City-St-Zip: ORMOND BEACH, FL 32174

Title: D2 () Delete
Name: GREGORY, JR, EDWARD D2
Address: 500 RODEO RD
City-St-Zip: ORMOND BEACH, FL 32174

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN M O'BRIEN

TRES

10/26/2004

Electronic Signature of Signing Officer or Director

_____ Date