**FILED** 

## 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 764806				n,	Mar 07, 2001 8:00 a Secretary of State					
THE FL	ORIDA FIRE MARSHALS ASS	OCIATION, INC.				01-30-2	2001 900	68 017 **	***61.25	
Principal Plac	ce of Business	Mailing Address								
FFMA 3108 S.E. 21 COURT OKEECHOBEE FL 34974 US		FFMA 3108 S.E. 21 COURT OKEECHOBEE FL 34974 US			E 1887 IN TORS ON A PROPERTIES COME AND A CO					
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State		City & State		4. FEI Number 59-2226351 Applied For Not Applicable					]	
Zip Country		Zip	Country		5. Certificate of Status Desired Security Securi					
	6. Name and Address of Current I	Registered Agent			7. Name and	Address of New	Registered	Agent		-
DIETZ, DANIEL J 1500 OLD DIXIE HWY.			Street Address (P.O. Box Number is Not Acceptable)							-
VERO/BE	ACH FL 32960		City	BON	SPRING	35	FL	Zip Coo 34 68	1e	
8. The above	e named entity submits this statement for	the purpose of changing its re	egistered office o	r registere	ed agent, or bot	h, in the state of F	lorida.			
SIGNATURE	RICHARD C. BLACK		•			1-	22:01	/		
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: f	Registered Agent signs	ture required	when reinstating)		DATE			
	FILE NOW: FEE IS \$61.25	9. Election Campaign F Trust Fund Contribut			D May Be to Fees			Payable to t of State	•	
10.	OFFICERS AND DIR	ECTORS	11.	A	DOITIONS/CH/	NGES TO OFFIC	ERS AND D	IRECTORS IN	V 10	}
TITLE	D	<b>⊠</b> Deleta	TITLE	SEC	REPARY M	REASURER (	$\mathcal{D}$	☐ Change	<b>★</b> Addition	8
NAME STREET ADORESS CITY-ST-ZIP	GREGORY, LARRY 122 MARKELLA ROAD FORT WALTON BEACH FL	NAME . Street address City-St-Zip	BUTCH	ECRETARY MREASURER D Change Addition Strike, RICHARD C C CHANGE C C CHANGE C C CHANGE C CANGE CHANGE C CANGE CANGED C CANGE CANGE C Addition C C CANGE C Addition C C C C C C C C C C C C C C C C C C C						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RANDALL, STEVE 225 NEWBURYPORT AVENUE ALTAMONTE SPRINGS F	<b>≥</b> Delete	TITLE ** NAME STREET ADDRESS CITY-ST-ZIP	3210	DONARD S TO TH DA, FC	57	) H .[	<b>⊠</b> Change	Addition	CR2
TITLE	ST	<b>⊠</b> Delete	TITLE			DIRECTO	e	Change	Addition	1
NAME STREET ADDRESS CITY-ST-ZIP	DIETZ, DANIEL J 1500 OLD DIXIE HWY VERO BEACH FL 32960		NAME STREET ADORESS CITY-ST-ZIP	BROO 700 SAFET	K, RICHER MAIN ST Y HARBER,	NC 346	<del></del>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP APFELBECK, TONY 400 ALEXANDRIA BLVD.	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2024	GOB - BONE, CM 5. FAM:	HERINE ( 33928		☐ Change	Addition	
TITLE , NAME STREET ADDRESS	OVIEDO FL VP GOFF, DONALD M 3210 SOUTH 78 STREET	☐ Delete	TITLE NAME STREET ADDRESS	CSIDE		33728	1	Change	☐ Addition	
CITY-ST-ZIP	TAMPA FL 33619	☐ Delete	CITY-ST-ZIP	VP DEAU	U CANE	·	1	Change	☐ Addition	}
NAME STREET ADDRESS CITY-ST-ZIP	PEAVY, STEVEN 225 MINEW BRUNMST AVE ALTAMONTE SPRINGS FL 33410		NAME STREET ADDRESS CITY-ST-ZIP	225 A	NEWBUN	and hu angs, FC	33410	) <u> </u>		
indicated of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empor , or on an attachment with an address, w	true and accurate and that my wered to execute this report as	ne exemption sta signature shall h	ited in Sec	tion 119.07(3)(i eme legal effect	), Florida Statutes. as if made under	oath; that I a	am an officer	or director	