


FILED
May 08, 2003 8:00 am
Secretary of State

05-08-2003 90167 029 ****61.25

**2003 NOT-FOR-PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N01000001072		
1. Entity Name BLACKMAN FIRE DISTRICT, INC.		
Practical Place of Business 1850 HWY 2 BAKER, FL 32531		Mailing Address C/O 2107 HWY 2 BAKER, FL 32531
2. Principal Place of Business State, Apt. #, etc.		3. Mailing Address 1982 Horsecreek Rd State, Apt. #, etc.
City & State Zip		4. FEI Number 59-3461664 Applied For Not Applicable
City & State Zip		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent PRESTWOOD, ANDREA S 2107 HWY 2 BAKER, FL 32531		7. Name and Address of New Registered Agent Name: RANDY H. BASTON Street Address (P.O. Box Number is Not Acceptable) 1982 Horsecreek Rd City: BAKER FL Zip Code: 32531
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>Randy H. Baston</u> DATE: <u>5-5-03</u>		
<input type="checkbox"/> Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees		<input type="checkbox"/> Making Good Payable to Florida Department of State
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete DS TEW, ALLEN D 7491 RED BARROW RD BAKER, FL 32531	TITLE NAME STREET ADDRESS CITY-STATE-ZIP
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete D TEW, SAM C 7712 PEACOCK ROAD BAKER, FL 32531	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-STATE-ZIP
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input checked="" type="checkbox"/> Change D FINKEL, DALE E 1249 FINKEL RD BAKER, FL 32531	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-STATE-ZIP
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input checked="" type="checkbox"/> Change D SLOAN, RICHARD A 7574 HWY 189 N BAKER, FL 32531	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-STATE-ZIP
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete DT BASTON, RANDY H 1982 HORSE CREEK RD BAKER, FL 32531	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-STATE-ZIP
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition TITLE NAME STREET ADDRESS CITY-STATE-ZIP
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 trustee empowered to execute this report as required by Chapter 517, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with its address, with all other filers empowered.		
SIGNATURE: <u>Randy H. Baston</u> DT <u>5-5-03</u>		

CREATED BY (10/02)