FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N16001

(2)

FIRE CHIEFS ASSOCIATION OF PALM BEACH COUNTY, IN C.

Principal Place of Business Mailing Address					1 1001/701 001 11010 0111/ 0011/ 0010 1101 0101/ 0101/ 0101/ 0101/ 0101/ 0101/		
		-					
357 TEOUESTA DRIVE P O BOX 3273 TEOUESTA FL 33469 TEOUESTA FL 33469-0273							
US		US	•				
					3. Date Incorporated or Qualified 07/23/1986	3a. Date of Last 02/27/1	
	lace of Business	2a. Mailing Address		4. FEI Number		Applied For	
21 BOYNTON BEACH FIRE DEPARTMENT Suite, Apt. #, etc.		26 100 EAST BOYNTON BEACH BLVD. Suite, Apt. #, etc.		BLVD.	59-2773309		Not Applicable
22		27			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be		
Zip	Country	28 BOYNTON BEACH, FL		····	Trust Fund Contribution L. Added to Fees		
24			<u></u>	Country 8. This corporation has liability for Florida Statutes			
	9. Name and Address of Current		130 0.3.A.	<u> </u>	Florida Statutes 10. Name and Address of New Re	Yes No	
			81	Name	10. Name and Address of New Ma	Jistered Agent	
ARRANT	S, E F						
10500 N MILITARY TR			82	Street Addre	ess (P.O. Box Number is Not Acceptable)	1	
PALM BCH GDNS FL 33410			83				
			84	04.			
				City			p Code
 Pursuant or registe 	to the provisions of Sections 617,0502 red agent, or both, in the State of Florid	and 617.1508, Florida Statutes	the above nar	ned corpora	ation submits this statement for the purpo		egistered office
familiar w	th, and accept the obligations of, Section	on 617.0503, Florida Statutes.	o by the corpora	ation's board	ation submits this statement for the purpo d of directors. I hereby accept the appoin	itment as registered	agent. I am
SIGNATURE	Placeton And Andrews						
12.	Signature, typed or printed name of registered agent a OFFICERS AND		: Registered Agent si	gnature required		DATE	
TITLE	SD DELETE		1.1 TITLE	SI	ADDITIONS/CHANGES TO OFFICE		··
NAME	WEINAND, JAMES M	_	1.2 NAME		DRDAN, FLOYD	X Change	☐ Addition
STREET ADDRESS	357 TEQUESTA DRIVE		1.3 STREET AD		OO EAST BOYNTON BEACH BLVD		
City-St-Zip	TEQUESTA FL		1.4 CITY-ST-Z		DYNTON BEACH, FL 33425	•	i
TITLE	VD	DELETE	21 TITLE	vi)	X Change	Addition
NAME	BRICE, HERMAN		2.2 NAME	C/	ARMAN, JAMES M.		
STREET ADDRESS	50 S MILITARY TRAIL		2 3 STREET ADI	DRESS 50	OO N. DIXIE HIGHWAY		
C-IV CI 7/P	WEST PALM BEACH FL		2 4 CITY-ST-7		EST PALM BEACH, FL 33401		
TITLE	PD KEEPS	DELETE	3.1 TITLE	ļ PC		X Change	☐ Addition
NAME	KOEN, KERRY		3.2 NAME	l l	EINAND, JAMES M.		_
STREET ADDRESS	2333 W. GLADES ROAD		3.3 STREET ADO		57 TEQUESTA DRIVE		
CITY-ST-ZIP TITLE	BOCA RATON FL TD		3.4. CITY-ST-Z		QUESTA, FL 33469		
NAME	Wester, Richard	DELETE	4.1 TITLE	מד		(X) Change	Addition
STREET ADDRESS	600 W BLUE HERON BLVD		4. 2 NAME	1	ICAR, STEPHEN P.		
CITY-ST-ZIP	RIVIERA BCH FL		4.3 STREET ADD	00	O W. BLUE HERON BLVD.		j
TITLE	TATILITY DOTT TE	DELETE	4.4 CITY - ST - ZI	P RI	VIERA BEACH, FL 33404		
NAME		Preceit	5.1 TITLE			Change	Addition
STREET ADDRESS			52 NAME				
CITY-ST-ZIP			5 3 STREET ADD				
TITLE		DELETE	5.4 CITY-ST-ZI	P			
NAME		- Joseph C	6.2 NAME			Change	Addition
STREET ADDRESS			6.3 STREET ADD	BECC			
CITY-ST-ZIP			6.4 CHTY-ST-ZH	1			
			a 0.4 0111-31-21				I

14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNAT

AND TYPEO OR PRINTED PARE OF SIGNING OFFICER OR DIRECTOR

2/15/96

(407) 375-6331

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Daytime Prione #

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