

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N17183** (7)
1. Corporation Name
PETERS ROAD VOLUNTEER FIRE DEPARTMENT, INC.



Principal Place of Business: % CHARLES J. URIG JR. 2200 SW 46TH AVENUE FT. LAUDERDALE FL 33317
Mailing Address: % CHARLES J. URIG JR. 2200 SW 46TH AVENUE FT. LAUDERDALE FL 33317

3. Date Incorporated or Qualified 10/08/1986	3a. Date of Last Report 02/13/1995
4. FEI Number 59-1823954	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

21. Principal Place of Business	2a. Mailing Address
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State	28. City & State
24. Zip	29. Zip
25. Country	30. Country

9. Name and Address of Current Registered Agent

**URIG, CHARLES JOSEPH JR.
1219 S.W. 31ST STREET
FT. LAUDERDALE FL 33315**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CROTTY, DON, SR.	12 NAME	
STREET ADDRESS	2330 SW 42ND TERRACE	13 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL	14 CITY - ST - ZIP	
TITLE	DVP <input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCOY, JOHN	22 NAME	
STREET ADDRESS	2341 SW 42ND TERRACE	23 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL	24 CITY - ST - ZIP	
TITLE	DS <input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	URIG, CHARLES, JR.	32 NAME	
STREET ADDRESS	1219 SW 31ST STREET	33 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL	34 CITY - ST - ZIP	
TITLE	DT <input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TURNER, J. DAVID	42 NAME	
STREET ADDRESS	1940 SW 69TH AVENUE	43 STREET ADDRESS	
CITY - ST - ZIP	PLANTATION FL	44 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Charles J. Urig Jr.* **CHARLES J. URIG JR.** 3/13/96 (954) 524-3916
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)