

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 30, 2004 8:00 am**  
**Secretary of State**

01-30-2004 90076 049 \*\*\*\*61.25

<b>DOCUMENT # N17183</b>					
1. Entity Name PETERS ROAD VOLUNTEER FIRE DEPARTMENT, INC.					
Principal Place of Business C/O BARRY H STEARNS 2200 SW 46TH AVENUE FT. LAUDERDALE, FL 33317			Mailing Address 5201 SW 4 STREET PLANTATION, FL 33317		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1823954	
Zip		Country		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>			8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent STEARNS, BARRY A 5201 SW 4TH STREET FORT LAUDERDALE, FL 33317			7. Name and Address of New Registered Agent Name: <u>BARRY H. STEARNS</u> Street Address (P.O. Box Number is Not Acceptable) City: <u>PLANTATION, FL</u> Zip Code: <u>33317</u>		
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>[Signature]</u> DATE: <u>1/28/04</u>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Main check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 2003		
TITLE	DP	STEARNS, LANEY E	TITLE	Change	Addition
NAME	5581 SW 13 STREET	PLANTATION, FL 33317	NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	DVP	CROTTY, TIM	TITLE	Change	Addition
NAME	3380 NW 97 TERR	SUNRISE, FL 33351	NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	DS	URIG, CHARLES, JR.	TITLE	Change	Addition
NAME	1219 SW 31ST STREET	FT. LAUDERDALE, FL 33315	NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	DT	STEARNS, BARRY	TITLE	Change	Addition
NAME	5201 SW 4 STREET	PLANTATION, FL 33317	NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE			TITLE	Change	Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE			TITLE	Change	Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>[Signature]</u> DATE: <u>1/28/04</u> PHONE: <u>954-533-6534</u>					