

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 05, 2005
Secretary of State**

DOCUMENT# N17183

Entity Name: PETERS ROAD VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:

C/O BARRY H STEARNS
2200 SW 46TH AVENUE
FT. LAUDERDALE, FL 33317

New Principal Place of Business:

Current Mailing Address:

5201 SW 4 STREET
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 59-1823954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEARNS, BARRY A
5201 SW 4TH STREET
FORT LAUDERDALE, FL 33317 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: STEARNS, LANEY E
Address: 5581 SW 13 STREET
City-St-Zip: PLANTATION, FL 33317

Title: DVP () Delete
Name: CROTTY, TIM
Address: 3360 NW 97 TERR
City-St-Zip: SUNRISE, FL 33351

Title: DS () Delete
Name: URIG, CHARLES, JR.,
Address: 1219 SW 31ST STREET
City-St-Zip: FT. LAUDERDALE, FL 33315

Title: DT () Delete
Name: STEARNS, BARRY
Address: 5201 SW 4 STREET
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARRY H STEARNS

DT

02/05/2005

Electronic Signature of Signing Officer or Director

_____ Date