

3/14/

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 12, 2001 8:00 am
Secretary of State

03-14-2001 90522 004 ****70.00

DOCUMENT # N44718

1. Entity Name

JENSEN BEACH VOLUNTEER FIRE DEPARTMENT, INC.

Principal Place of Business

Mailing Address

150 NE SAMARITAN ST
JENSEN BEACH FL 34957
USP.O. BOX 223
JENSEN BEACH FL 34958-0223

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2702139

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒ \$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent, one side if applicable

New Registered Agent Signature (required when reinstating)

DATE

FILE NOW:**FEE IS \$61.25**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**☒**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	T	☒ Delete
NAME	GIANNINI, VITO	
STREET ADDRESS	2548 NE WILDA ST.	
CITY-ST-ZIP	JENSEN BEACH FL	

TITLE	D	☐ Delete
NAME	MAHONEY, SAN	
STREET ADDRESS	1430 NE CHARDER ST	
CITY-ST-ZIP	JERSAN BEACH FL 34957	

TITLE		☒ Delete
NAME	ROTH, WALTER	
STREET ADDRESS	201 SW PARISH TERR	
CITY-ST-ZIP	PORT ST LUCIE FL 34983	

TITLE	S - I	☐ Delete
NAME	BERKUTA, SARAH	
STREET ADDRESS	2731 NE SAVANNAH RD	
CITY-ST-ZIP	JENSEN BEACH FL 34957	

TITLE		☐ Delete
NAME	WOOHEY, LAURA	
STREET ADDRESS	11435 E O'DONNELL LANE	
CITY-ST-ZIP	PORT ST LUCIE FL 34983	

TITLE	P	☒ Delete
NAME	SCOTT, JOHN R.	
STREET ADDRESS	1154 NE TERRANCE WAY	
CITY-ST-ZIP	JENSEN BEACH FL 34957	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	(T) ROB BROWN	☐ Change ☒ Addition
NAME	2290 NE COHN LI	
STREET ADDRESS	JENSEN BEACH FL 34957	
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	(D) CHIEF	☐ Change ☒ Addition
NAME	JAMES TAYLOR	
STREET ADDRESS	2469 NE 12TH	
CITY-ST-ZIP	JENSEN BEACH FL 34957	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	(P) KEITH THOMAS	☐ Change ☒ Addition
NAME	2243 NE MARGUERITE ST	
STREET ADDRESS	JENSEN BEACH FL 34957	
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)(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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (3/000)