

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT CORPORATION
 ANNUAL REPORT
1996



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

DOCUMENT # N94000002170 (8)

1. Corporation Name

WEST SIDE FIRE DEPARTMENT INC.



Principal Place of Business 407 67TH ST W BRADENTON FL 34209	Mailing Address 407 67TH ST W BRADENTON FL 34209
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2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 65-0534648	Applied For Not Applicable
Suite, Apt #, etc. 22	Suite, Apt #, etc. 27	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30
9. Name and Address of Current Registered Agent		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent INGOLD, JOHN K 3502 MYORK DR WEST BRADENTON FL 34205		10. Name and Address of New Registered Agent	
		81 Name DENNIS M. SCHNACK	
		82 Street Address (P.O. Box Number is Not Acceptable) 407 67th ST W	
		83	
		84 City BRADENTON	85 Zip Code FL 34209

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, 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: *[Signature]* DATE: **6/29/96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	NAME INGOLD, JOHN	1.1 TITLE P-D	NAME AREN BELK
STREET ADDRESS 3502 YORK DR W	CITY - ST - ZIP BRADENTON FL	1.2 NAME	1.3 STREET ADDRESS 5711 2ND AVE DR NW
		1.4 CITY - ST - ZIP BRADENTON, FL 34209	
TITLE VD	NAME KRUSE, ERNEST B	2.1 TITLE V-D	NAME TIM HAAS
STREET ADDRESS 6812 12TH AVE NW	CITY - ST - ZIP BRADENTON FL	2.2 NAME	2.3 STREET ADDRESS 407 67th ST W
		2.4 CITY - ST - ZIP BRADENTON, FL 34209	
TITLE SD	NAME LEVINE, JEFFREY	3.1 TITLE T-D	NAME DENNIS M SCHNACK
STREET ADDRESS 5210 19TH AVE W	CITY - ST - ZIP BRADENTON FL	3.2 NAME	3.3 STREET ADDRESS 926 82ND ST NW
		3.4 CITY - ST - ZIP BRADENTON, FL 34209	
TITLE	NAME	4.1 TITLE S-D	NAME BOB BECHT
STREET ADDRESS	CITY - ST - ZIP	4.2 NAME	4.3 STREET ADDRESS 407 67th ST W
		4.4 CITY - ST - ZIP BRADENTON, FL 34209	
TITLE	NAME	5.1 TITLE Dz Directors	5.2 NAME
STREET ADDRESS	CITY - ST - ZIP	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
		6.1 TITLE 800001902588	6.2 NAME -07/23/96--01143--004
		6.3 STREET ADDRESS ***70.00	6.4 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: *[Signature]* DATE: **6/28/96** TIME: **9:41 - 7:12 - 0377**

CR2E037 (3/96)