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NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 740077

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SATELLITE REACH VOLUNTEER FIRE DEPARTMENT, INC.

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Principal Place of Dusiness 2a. Mailing Address 4. FIT Number 75,9-1910783 76,0-191078												
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Sure, Apt. #, etc. Sure, Apt. #, etc.	2. Principal Place of Business				2a. Mailing Address							
27	<u>n</u>								29-19 10/83			
28	Suite, Apt. #, etc.							5. Certificate of Status Desired				
Section Sect					F=-g '				, ,		,	
BYAN, DAVE 410 WILSON AVE. SATELLITE BEACH FL 32937 11. Pursuant to the provisions of Sectores 617.0502 and 617.1506, Florida Statutes, the above-varied corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Sectore 167.0502 and 617.1506, Florida Statutes, the above-varied corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Sectore 167.0502, Plorida Statutes, the above-varied corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Sectore 167.0503, Plorida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS'CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. DIRE PD DELETE 1.1. DILLE DELETE 1.1. DILLE DIRECTORS IN 12. 14. DIVENANCE 1.3. ADDITIONS'CHANGES TO OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS'CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. DELETE 1.1. DILLE DIRECTORS IN 12. 16. DELETE 1.1. DILLE DIRECTORS IN 12. 17. ADDITIONS'CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS'CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. DELETE 1.1. DILLE DIRECTORS IN 12. 19. DELETE 1.1. DILLE DIRECTORS IN 12. 20. STREET ADDRESS AND DIRECTORS IN 12. 21. STREET ADDRESS AND DIRECTORS IN 12. 22. STREET ADDRESS AND DIRECTORS IN 12. 23. STREET ADDRESS ATELLITE BEACH FL 1.1. DILLE DIRECTORS IN 12. 24. CITY-S1-2P 34. CITY-S1-2P 34. CITY-S1-2P 34. CITY-S1-2P 35. ADDITIONS'CHANGES OF TARREST ADDRESS IN 12. 35. ADDITIONS'CHANGES IN 0.0 OFFICERS AND DIRECTORS IN 12. 36. DIRECTORS IN 12. 37. ADDITIONS'CHANGES IN 0.0 OFFICERS AND DIRECTORS IN 12. 38. ADDITIONS'CHANGES IN 0.0 OFFICERS AND DIRECTORS IN 12. 39. ADDITIONS'CHANGES IN 0.0 OFFICERS AND DIRECTORS IN 12. 39. ADDITIONS'CHANGES IN 0.0 OFFICERS AND DIRECTORS IN 12. 39. ADDI	Zip	Zip Country			Zip Country			,				
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RYAN, DAVE 410 WILSON AVE. SATELLITE BEACH FL 32937 84 Oity FL 85 Zip Code 11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Statutes the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the oldglateners of, Sections 617,0502 and 617,1508. Florids Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ALIDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12 TILE 14. DIRECTORS OFFICERS AND DIRECTORS 15. ALIDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12 TILE 16. PD 17. SATELLITE BEACH FL 18. ALIDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12 18. STREET ADDRESS 19. STREET ADDRESS 29. S		9. Name (and Address of Curre	nt Hegi	stered Agent		91	Namo	10. Name and Address of New Re	gistered A	gent	
410 MLSON AVE. SATELLITE BEACH FL 32937 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-harned corporation submits this statement for the purpose of changing list 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, it am familiar with, and accept the obligations of, Sacritic net 017.0505. Provide Statutes, and accept the obligations of, Sacritic net 017.0505. Provide Statutes, and accept the obligations of, Sacritic net 017.0505. Provide Statutes, and accept the obligations of, Sacritic net 017.0505. Provide Statutes, and accept the obligations of, Sacritic net 017.0505. Provide Statutes, and accept the obligations of, Sacritic net 017.0505. Provide Statutes are obligations of Sacritic net 017.0505. Provide Sacritic net 017.050	B V411 B	41.10										
SATELLITE BEACH FL 32937 83								Street Addre	ess (P.O. Box Number is Not Acceptable)			
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 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, and accept the obligitations of, Section 617.0502, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and registered agent and state agent and the Legicobia. SIGNATURE 12. OFFICERS AND DIRECTORS. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TILE PD OFFICERS AND DIRECTORS IN 12. ITILE PD ORDERS ATILITE BEACH FL 11. TILE 12. AUMISON AVE. 13. SIRECT ADDRESS ATILITE BEACH FL 14. DIVERS. 13. SIRECT ADDRESS ATILITE BEACH FL 14. DIVERS. 14. SIRECT ADDRESS ATILITE BEACH FL 15. TILE 16. Change Addition AMME STATELLITE BEACH FL 16. Change Addition AMME STATELLITE BEACH FL 16. Change Addition AMME STATELLITE BEACH FL 17. ATILITE 10. Change Addition AMME STATELLITE BEACH FL 14. DIVERS. 3. STREET ADDRESS 3. STREET ADDRE			FI 32937			İ	83					
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the ebove-named corporation submits this statement for the purpose of changing is 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, it am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE Signature	V/ 11 EEE1	12 02 1011	2 0200.			ŀ	84	City			RS Zin	Code
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, Horida Statutes. SIGNATURE Signature Signature, had of printed name of registered agent and till applicable. POTE												
Signature, bysoid or printed name of registed daymen and ties if registative (POTE Registered Agents or year area when mentalized)	or register	red agent, or b	oth, in the State of Flo	rida. Suc	ch change was authorize	ed by the c	orpi	named corpora oration's board	ation submits this statement for the purp d of directors. I hereby accept the appoi	ose of char ntment as i	nging its re egistered	egistered office agent. I am
12.	SIGNATURE			. 100		e encomm						
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		l ov certify that t	he information supplied	with thi	s filino is voluntarily furni				x the exemption stated in Section 119.0	7(3)(k). Flor	ida Statuti	es. I further

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: JE JULIAN JE F FICY I, Goldberg 3/25/96 407861-2210
Determine and typed or printed Name of Signing Officer or Director (7/805/11)
Determine Determine Prome #