

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2005 8:00 am
Secretary of State

02-03-2005 90038 027 ****61.25

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01222005 Chg-NP CR2E037 (10/03)

DOCUMENT # 752205					
1. Entity Name RIVERSIDE VOLUNTEER FIRE DEPARTMENT, INC.					
Principal Place of Business 101 GAIL DRIVE SAN MATEO, FL 32189			Mailing Address U.S. HIGHWAY 17 SOUTH P. O. BOX 694 SAN MATEO, FL 32187		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-1967981	
				Applied For Not Applicable	
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		
FIELDS, ROBERT M 413 ST. JOHNS AVENUE PALATKA, FL 32177			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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.		
TITLE	P	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	KIRBY, THELMA C.		NAME		
STREET ADDRESS	118 CREEKSIDE RD		STREET ADDRESS		
CITY-ST-ZIP	SATSUMA, FL 32189		CITY-ST-ZIP		
TITLE	VP	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	HARRIS, TAMMY		NAME		
STREET ADDRESS	135 PALMETTO RD		STREET ADDRESS		
CITY-ST-ZIP	SATSUMA, FL 32189		CITY-ST-ZIP		
TITLE	T	☐ Delete	TITLE	☒ Change ☐ Addition	
NAME	ROY, JOSEPH		NAME	T ROY JOSEPH	
STREET ADDRESS	109 PINEWAY AVE		STREET ADDRESS	112 PINEWAY AVE	
CITY-ST-ZIP	SATSUMA, FL 32189		CITY-ST-ZIP	SATSUMA, FL 32189	
TITLE	VP	☒ Delete	TITLE	☐ Change ☒ Addition	
NAME	HARRIS, TAMMY		NAME	D DIANE FARNSWORTH	
STREET ADDRESS	521(LOT)41 SAN MATEO RD		STREET ADDRESS	302 RABBIT TRACK	
CITY-ST-ZIP	SATSUMA, FL 32189		CITY-ST-ZIP	SATSUMA, FL 32189	
TITLE	S	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	ROY, NORMA		NAME		
STREET ADDRESS	112 PINEWAY		STREET ADDRESS		
CITY-ST-ZIP	SATSUMA, FL 32189		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	GROSSHOLZ, ROBERT		NAME		
STREET ADDRESS	113 NAVAJO ST		STREET ADDRESS		
CITY-ST-ZIP	SATSUMA, FL 32189		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: <i>Belinda G Steybe</i> BELINDA G STEYBE 27 JAN '05 325-3420 (386)					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					