

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 711047

**Entity Name:** THE LAYTON VOLUNTEER FIRE DEPARTMENT, INC.

**Current Principal Place of Business:**

68260 OVERSEAS HWY  
LONG KEY, FL 33001-0624

**Current Mailing Address:**

68260 OVERSEAS HWY  
PO BOX 624  
LONG KEY, FL 33001-0624

**FEI Number:** 59-2336398

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HARING, RITA MTRES  
68300 OVERSEAS HWY  
LAYTON, FL 33001 US

*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

**Officer/Director Detail :**

Title VP  
Name DAVIS, ROBERT  
Address PO BOX 422  
City-State-Zip: LONG KEY FL 33001

Title S  
Name SCOTT, CLARLYN  
Address PO BOX 517  
City-State-Zip: LAYTON FL 33001

Title OFFICER  
Name FUSCO, JOHN  
Address PO BOX 517  
City-State-Zip: LAYTON FL 33001

Title T  
Name HARING, RITA  
Address PO BOX 838  
City-State-Zip: LONG KEY FL 33001

Title PRESIDENT  
Name HRYTZAY, ARTHUR  
Address PO BOX 555  
City-State-Zip: LONG KEY FL 33001

*I hereby 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 all other like empowered.*

**SIGNATURE:** RITA M. HARING

**TREASURER**

**01/27/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date