

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000012050

Entity Name: BLACKMAN FIRE DISTRICT CORPORTION**Current Principal Place of Business:**1850 HIGHWAY 2
BAKER, FL 32531**Current Mailing Address:**P.O. BOX 279
BAKER, FL 32531**FEI Number: 27-3259410****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**LAWSON, JAMES L
1996 GRADY BAGGETT ROAD
BAKER, FL 32531 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	COMM
Name	LAWSON, JAMES L
Address	1996 GRADY BAGGETT ROAD
City-State-Zip:	BAKER FL 32531

Title	COMM
Name	MILLER, RONALD
Address	8513 YELLOW RIVER BAPTIST CHURCH ROAD
City-State-Zip:	BAKER FL 32531

Title	COMMISSIONER
Name	FOUNTAIN , STEPHEN LADEL
Address	7525 SHERMAN KENNEDY ROAD
City-State-Zip:	BAKER FL 32531

Title	COMM
Name	CUNNINGHAM, LARRY
Address	7558 RED BARROW ROAD
City-State-Zip:	BAKER FL 32531

Title	COMMISSIONER
Name	LAWSON , STEVEN DWAYNE
Address	1990 GRADY BAGGETT ROAD
City-State-Zip:	BAKER FL 32531

Title	FIRE CHIEF
Name	BINGHAM, BRIAN
Address	1311 JOHN RILEY BARNHILL ROAD
City-State-Zip:	BAKER FL 32531

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: JAMES L LAWSON**COMMISSIONER****01/28/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date