

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 228377**

1. Entity Name

RURAL/METRO CORPORATION OF FLORIDA**FILED****May 01, 2002 8:00 am**
Secretary of State

05-01-2002 91521 043 ***150.00

Principal Place of Business
**4728 OLD WINTER GARDEN RD
ORLANDO FL 32811**

Mailing Address
**PO DRAWER F
SCOTTSDALE AZ 85252
US**

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 **59-0934668**

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

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent's signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	PD BRUCKER, JACK E	8401 E. INDIAN SCHOOL RD.	SCOTTSDALE AZ 85251	<input type="checkbox"/>
	AS STEVENS, DAVID	8401 E. INDIAN SCHOOL RD.	SCOTTSDALE AZ 85251	<input checked="" type="checkbox"/>
	S BANAS, JOHN S	8401 E. INDIAN SCHOOL RD.	SCOTTSDALE AZ 85251	<input type="checkbox"/>
	AT STEVENS, DAVID E	8401 E. INDIAN SCHOOL RD.	SCOTTSDALE AZ 85251	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	Emily Reay Assistant Secretary	8401 E. INDIAN SCHOOL RD.	SCOTTSDALE, AZ 85251	<input checked="" type="checkbox"/>
	TREAS RANDALL L. HARMSEN	8401 E. INDIAN SCHOOL RD.	SCOTTSDALE, AZ 85251	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Emily Reay Assistant Secretary

480-606-3622

CR2F034 (9/01)