2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700529

FILED Apr 18, 2007 Secretary of State

Entity Name: BELLVIEW VOLUNTEER FIREMEN'S ASSOCIATION, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 7009 PINE FOREST ROAD PENSACOLA, FL 32526 **Current Mailing Address: New Mailing Address:** 7009 PINE FOREST ROAD PENSACOLA, FL 32526 FEI Number: 59-2347283 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHNSON, TROY 7009 PINE FOREST ROAD PENSACOLA, FL 32526 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition DAVEY, ALFRED JR FULTON, RICHARD Name: Name: 7120 MOORE AVENUE Address: 7009 PINE FOREST ROAD Address: City-St-Zip: PENSACOLA, FL City-St-Zip: PENSACOLA, FL 32526 (X) Change () Addition Title: () Delete Title: FULTON, RICHARD Name: DAVEY, ALFRED Name: Address: 7009 PINE FOREST ROAD Address: 7009 PINE FOREST ROAD City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32526 Title: () Delete Title: () Change () Addition JOHNSON, CHRISTY Name: Name: 7009 PONE FOREST ROAD Address: Address: City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ANDERS, JAYNE Name: 4970 LA VENTURA COURT Address: Address: City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: Title: () Delete Title: () Change () Addition CLARK, BEN Name: Name: 7009 PINE FOREST ROAD Address: Address: City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: Title: () Delete Title: () Change () Addition CLIFFORD, STANLEY Name: Name: Address: 7009 PINE FOREST ROAD Address: PENSACOLA, FL 32526 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RICHARD FULTON P 04/18/2007