

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 08 1997 8:00am
Secretary of State

DOCUMENT #

1. Corporation Name

700684
South Venice Volunteer Fire Dept.

Principal Place of Business

Mailing Address

South Venice Area Volunteer
Fire Department, Inc.
280 Alligator Drive
Venice, FL 34293

3. Date incorporated or Qualified
3/28/60

3a. Date of Last Report
8/13/96

2. Principal Place of Business

2a. Mailing Address

21 280 Alligator Drive
Suite, Apt. #, etc.

26 280 Alligator Drive
Suite, Apt. #, etc.

4. FEI Number 59-1632321
68-07-043760-650

Applied For
Not Applicable

22 City & State

27 City & State

23 Venice, FL
Zip 34293

28 Venice, FL
Zip 34293

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Frank Oddo
1450 Lemon Bay Drive
Venice, FL 34293

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE President ☐ DELETE
NAME Frank Oddo
STREET ADDRESS 1450 Lemon Bay Drive
CITY-ST-ZIP Venice, FL 34293

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE Sec/Tres. ☐ DELETE
NAME Dorothy Fairbrother
STREET ADDRESS 3460 Sunset Beach Drive
CITY-ST-ZIP Venice, FL 34293

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE Director ☐ DELETE
NAME Jack Benson
STREET ADDRESS 4397 Shamrock Blvd.
CITY-ST-ZIP Venice, FL 34293

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE Director ☐ DELETE
NAME Tony Gibbs
STREET ADDRESS 1481 Lemon Bay Dr.,
CITY-ST-ZIP Venice, FL 34293

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Frank Oddo, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Board of Directors, SVVFD

June 2, 1997

Date

Daytime Phone #

CR2E037 (9/96)