

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90311 036 \*\*\*\*61.25

**DOCUMENT # 702627**

1. Entity Name

LUTZ VOLUNTEER FIRE ASSOCIATION INC



Principal Place of Business

129 LAKE FERN RD  
P.O. BOX 416  
LUTZ FL 33548  
US

Mailing Address

129 LAKE FERN RD  
PO BOX 416  
LUTZ FL 33548  
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number  
59-2064086

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

FISHER, BEN  
18631 GERACI ROAD  
LUTZ FL 33548

Name JAY MUFFLY

Street Address (P.O. Box Number is Not Acceptable)  
102 5TH AVE SE

City LUTZ, FL

FL Zip Code 33549

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Jaya Muffly*

(NOTE: Registered Agent signature required when reissuing)

DATE

4-21-06

FILE NOW: FEE IS \$61.25  
Due By May 1, 2006

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

|                |                         |  |
|----------------|-------------------------|--|
| TITLE          | VD                      | <input checked="" type="checkbox"/> Delete |
| NAME           | SMITH, EARL             |  |
| STREET ADDRESS | 3627 BERGER ROAD        |  |
| CITY-ST-ZIP    | LUTZ FL 33548           |  |
| TITLE          | PD                      | <input checked="" type="checkbox"/> Delete |
| NAME           | FISHER, B               |  |
| STREET ADDRESS | 18631 GERACI RD         |  |
| CITY-ST-ZIP    | LUTZ FL 33548           |  |
| TITLE          | SD                      | <input type="checkbox"/> Delete            |
| NAME           | STEVENS, RANDY          |  |
| STREET ADDRESS | 3609 BERGER RD          |  |
| CITY-ST-ZIP    | LUTZ FL                 |  |
| TITLE          | D                       | <input checked="" type="checkbox"/> Delete |
| NAME           | HERMS, JERRY            |  |
| STREET ADDRESS | 17700 HANNA RD          |  |
| CITY-ST-ZIP    | LUTZ FL 33549           |  |
| TITLE          | T                       | <input checked="" type="checkbox"/> Delete |
| NAME           | SORRENTINO, ROBERT      |  |
| STREET ADDRESS | 1001 NEWBERGER ROAD     |  |
| CITY-ST-ZIP    | LUTZ FL 33549           |  |
| TITLE          | D                       | <input type="checkbox"/> Delete            |
| NAME           | HOEDT, WILLIAM H        |  |
| STREET ADDRESS | 202 LUTZ LAKE FERN ROAD |  |
| CITY-ST-ZIP    | LUTZ FL 33548           |  |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

|                |                   |  |
|----------------|-------------------|--|
| TITLE          | PD                | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | JAY MUFFLY        |  |
| STREET ADDRESS | 102 5TH AVE SE    |  |
| CITY-ST-ZIP    | LUTZ, FLA 33549   |  |
| TITLE          | VD                | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | ROBERT SORRENTINO |  |
| STREET ADDRESS | 1001 NEWBERGER RD |  |
| CITY-ST-ZIP    | LUTZ, FL 33549    |  |
| TITLE          | T                 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | NICK SETTE DUCASO |  |
| STREET ADDRESS | 1309 TRAIL BLN LN |  |
| CITY-ST-ZIP    | LUTZ, FL 33549    |  |
| TITLE          | SD                | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | DEBBIE MAY        |  |
| STREET ADDRESS | 19263 BLOUNT RD   |  |
| CITY-ST-ZIP    | LUTZ, FL 33558    |  |
| TITLE          | D                 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | BEN FISHER        |  |
| STREET ADDRESS | 18631 GERACI RD   |  |
| CITY-ST-ZIP    | LUTZ, FL 33548    |  |
| TITLE          |                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |                   |  |
| STREET ADDRESS |                   |  |
| CITY-ST-ZIP    |                   |  |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Jaya Muffly*

JAYA MUFFLY

4-21-06

813-949-2224