2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2009
Secretary of State

DOCUMENT# 702627

Entity Name: LUTZ VOLUNTEER FIRE ASSOCIATION INC

Current Principal Place of Business:

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

New Principal Place of Business:

129 LAKE FERN RD
LUTZ, FL 33548 US

Current Mailing Address:

129 LAKE FERN RD
PO BOX 416
LUTZ, FL 33548 US

New Mailing Address:

FEI Number: 59-2064086 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MUFFLY, JAY
102 5TH AVE SE
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

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:

Title:	PD	( ) Delete
Name:	MUFFLY, JAY	
Address:	102 5TH AVE SE	
City-St-Zip:	LUTZ, FL 33549	
Title:	VD	( ) Delete
Name:	SORRENTINO, ROBERT	
Address:	1001 HENBERGER RD	
City-St-Zip:	LUTZ, FL 33549	
Title:	T	( ) Delete
Name:	SETTEDULATO, NICK	
Address:	1309 TRAIL GELN LN	
City-St-Zip:	LUTZ, FL 33549	
Title:	SD	( ) Delete
Name:	MAY, DEBBIE	
Address:	19263 BLOUNT RD	
City-St-Zip:	LUTZ, FL 33558	
Title:	D	( ) Delete
Name:	FISHER, BEN	
Address:	18631 GARACI	
City-St-Zip:	LUTZ, FL 33548	
Title:	D	( ) Delete
Name:	HOEDT, WILLIAM H	
Address:	202 LUTZ LAKE FERN ROAD	
City-St-Zip:	LUTZ, FL 33548	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VD	(X) Change ( ) Addition
Name:	SORRENTINO, ROBERT	
Address:	1001 NEWBERGER RD	
City-St-Zip:	LUTZ, FL 33549	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	FISHER, BEN	
Address:	18631 GARACI ROAD	
City-St-Zip:	LUTZ, FL 33548	
Title:	D	(X) Change ( ) Addition
Name:	COFFEY, MIKE	
Address:	18613 GERACI ROAD	
City-St-Zip:	LUTZ, FL 33548	

I hereby certify that the information supplied with this filing does not qualify 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: JAY MUFFLY PD 04/02/2009

Electronic Signature of Signing Officer or Director — Date