

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 703272

FILED
Oct 30, 2006
Secretary of State

Entity Name: MELROSE VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:

CYPRESS ST. & S.R.26
MELROSE, FL 32666

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 646
MELROSE, FL 32666

New Mailing Address:

FEI Number: 51-0198238 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROBIDONX, LARRY
141 HILLTOP LOOP
HAWTHORNE, FL 32640 US

Name and Address of New Registered Agent:

ROBIDOUX, LARRY
141 HILLTOP LOOP
HAWTHORNE, FL 32640 US

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: LARRY ROBIDOUX

10/30/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROBIDOUX, LARRY
Address: 141 HILL TOP LOOP
City-St-Zip: HAWTHORNE, FL 32640

Title: VD () Delete
Name: BROWN, ROBERT
Address: 161 PRICE RD
City-St-Zip: HAWTHORNE, FL 32640

Title: SD () Delete
Name: FLYNN, HOWARD R
Address: 121 LAKE MELROSE LANE
City-St-Zip: MELROSE, FL 32666

Title: TD () Delete
Name: LAWS, E S
Address: 6116 TROUT ST
City-St-Zip: MELROSE, FL 32666

Title: FCD () Delete
Name: LOFTIS, JOHN
Address: 100 LAKE CARLTON DR
City-St-Zip: MELROSE, FL 32666

Title: D (X) Delete
Name: BELL, MARVIS L
Address: 23915 NE SR 26
City-St-Zip: MELROSE, FL 32666

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: SMITH, WALTON
Address: 6435 LATCHSTRING CT
City-St-Zip: MELROSE, FL 32666

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: LARRY ROBIDOUX

PD

10/30/2006

Electronic Signature of Signing Officer or Director

Date