

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 703297

FILED
Oct 04, 2014
Secretary of State

Entity Name: EAST PALATKA VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:

158 LOUIS BROER ROAD
EAST PALATKA, FL 32131

New Principal Place of Business:

158 LOUIS BROER ROAD
EAST PALATKA, FL 32131 UN

Current Mailing Address:

P.O. BOX 644
E. PALATKA, FL 32131

New Mailing Address:

FEI Number: 64-1600176 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WILSON, DENA M BC
351 CR 207A
EAST PALATKA, FL 32131 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: DENA WILSON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: PINKERTON, JAMES PRES.
Address: 220 JIM BRYANT RD.
City-St-Zip: EAST PALATKA, FL 32131 US

Title: VP
Name: WILSON, DENA M VP
Address: 351 CR 207A
City-St-Zip: EAST PALATKA, FL 32131 US

Title: SEC
Name: COSTON, SAMANTHA E SEC.
Address: 351 CR 207A
City-St-Zip: E PALATKA, FL 32131 US

Title: TREA
Name: JOHNSTON, ALISA TREASUR
Address: 109 CULPEPPER RD
City-St-Zip: SAN MATEO, FL 32187 US

Title: BM
Name: PINKERTON, AMANDA BOARD
Address: 220 JIM BRYANT RD
City-St-Zip: E. PALATKA, FL 32131 US

Title: BM
Name: OWENS, STANLEY BOARD
Address: 171 W.GRANDVIEW RD.
City-St-Zip: EAST PALATKA, FL 32131 US

I hereby 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 all other like empowered.

SIGNATURE: DENA WILSON

CAPT

10/04/2014

Electronic Signature of Signing Officer or Director

Date