704873

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to rining direct.				





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03/09/20--01011--017 **35.00

New PW 2: 00

Shoha

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: The Debary Volunteer Firemen's Association Name of Corporation	on Incorperated
DOCUMENT NUMBER: 704873	······································
The enclosed Statement of Change of Registered Office	:/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Brian Joseph Beske	
Name of Contact Person	
The Debary Volunteer Firemen's Association Incoperate	ed
Firm/Company	
211 Bayou Vista St	
Address	
Debary, FL 32713	
City/State and Zip Code	
bbeske@ourorangecity.com	
E-mail address: (to be used for future annual report	notification)
For further information concerning this matter, please c	all:
Brian Joseph Beske	at (386) 837-9949 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Depart	ment of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of change is sub-	nitted for a corporation orga	02, 607,1508, or 617,1508, Flore nized under the laws of the State tered agent, or both, in the State	of_Florida
1. The name of the corpora	tion: The Debary Volunteer	Firemen's Association Incorpor	rated
2. The principal office addr	ess: 10 Columba RD, Debar	ry, FL 32713	
3. The mailing address (if o	lifferent): P.O. Box 530853.	, Debary, FL 32753-0853	
4. Date of incorporation/qu	alification: 12/03/1962	Document number: 7048	373
5. The name and street add		agent and registered office on fil	
Neyer, Do	onald James		
207 East	Highbanks Rd		~
Debary, F	L, 32713		2020 MAR
6. The name and street add (if changed):	ress of the new registered age	ent (if changed) and /or registered	d office
Beske, Br	ian Joseph		
211 Bayo	u Vista St		
Debary, F		ox NOT acceptable	
The street address of its reas changed will be identicated	gistered office and the stree	t address of the business office	of its registered agent.
Such change was authorize authorized by the board, o	ed by resolution duly adopte r the corporation has been n	ed by its board of directors or by otified in writing of the change.	an officer so
Wilsel John Ort	stire President	Michael John Anstine Properties or typed name of	~~1W C/1
I parthér agrée to comply y of my duties, and I am fam document is being filed ma	atment as registered agent as with the provisions of all sta siliar with and accept the ob- erely to reflect a change in to fied in writing of this change	nd agree to act in this capacity, nues relative to the proper and digation of my position as regis he registered office address, I h 2.	complete performance lered agent. Or, if this ereby confirm that the
1825	5	02/12/2020	
Signature of Regi-	stered Agent	Date	
If signing on behalf of an A	entity:		
Typed or Printed	I Name		

* * * FILING FEE: \$35.00 * * *