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Apr 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 705603 (9)

1. Corporation Name

THE RAVENSWOOD-GRIFFIN VOLUNTEER FIRE DEPARTMENT
, INC.

Principal Place of Business

Mailing Address

2449 WHALE HARBOR LANE
FT. LAUDERDALE FL 33312
US

2449 WHALE HARBOR LANE
FT. LAUDERDALE FL 33312
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

PHILLIPS, STEPHENS L
2449 WHALE HARBOR LANE
FT. LAUDERDALE FL 33312

3. Date Incorporated or Qualified

05/15/1963

4. FEI Number

59-1544066

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
PD
PHILLIPS, STEPHEN L
2449 WHALE HARBOR LANE
FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
SD
GAUTHIER, WESS
7172 SPORTSMAN DR.
N. LAUDERDALE FL 33068

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
TD
STACK, KATHERINE
2449 WHALE HARBOR LN.
FT. LAUDERDALE FL 33312

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
TD
STACK, KATHERINE
2449 WHALE HARBOR LN
FT LAUDERDALE FL 33312

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
D
COCHRAN, WAYNE
414 SW 7TH ST
FT LAUDERDALE, FL 0

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
D
RIMAVICUS, PAUL
4849 SW 32ND AVE
FT LAUDERDALE, FL 00000

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

3101 SW 16ST
FT. LAUD. FL. 33312

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Stephen L. Phillips* STEPHEN L. PHILLIPS 3-30-98 954-583-8648

CR2E037 (10/97)