2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706080

FILED Feb 05, 2009 Secretary of State

Entity Name: THE HIGHLAND CITY VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business: New Principal Place of Business:

4104 CLUBHOUSE ROAD LAKELAND, FL 33812

Current Mailing Address: New Mailing Address:

PO BOX 217 HIGHLAND CITY, FL 338460217

FEI Number: 59-2254076 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LALONDE, WILLIAM
4104 CLUBHOUSE RD
LAKELAND, FL 33846 US
HIGHLAND CITY VOLUNTEER FIRE DEPT. INC
4104 CLUBHOUSE RD
LAKELAND, FL 33846 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: DAWN SHORT 02/05/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PRES (X) Change () Addition Name: LALONDE, WILLIAM Name: LALONDE, WILLIAM Address: 4104 CLUBHOUSE RD

Address: 4104 CLUBHOUSE RD Address: 4104 CLUBHOUSE RD City-St-Zip: LAKELAND, FL 33812 City-St-Zip: LAKELAND, FL 33812

Title: TD () Delete Title: T (X) Change () Addition Name: SHORT, DAWN Name: SHORT, DAWN

Address: 4104 CLUBHOUSE RD Address: 4104 CLUBHOUSE RD City-St-Zip: LAKELAND, FL 33812 City-St-Zip: LAKELAND, FL 33812

Title: S () Delete Title: SEC (X) Change () Addition

 Name:
 SCHULTZ, STEVEN
 Name:
 KITHCART, FRANCES

 Address:
 4104 CLUBHOUSE RD
 4104 CLUBHOUSE RD

 City-St-Zip:
 LAKELAND, FL 33812
 City-St-Zip:
 LAKELAND, FL 33812

Title: D () Delete Title: () Change () Addition

 Name:
 PRINCE, ROBERT
 Name:

 Address:
 4104 CLUBHOUSE RD
 Address:

 City-St-Zip:
 LAKELAND, FL 33812
 City-St-Zip:

Title: VP () Delete Title: () Change () Addition

 Name:
 COCHRAN, JASON
 Name:

 Address:
 4104 CLUBHOUSE RD
 Address:

 City-St-Zip:
 LAKELAND, FL 33812
 City-St-Zip:

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: DAWN SHORT TREA 02/05/2009