

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 706160

1. Entity Name

SOUTHPORT VOLUNTEER FIRE DEPARTMENT, INC.

FILED
Feb 28, 2002 8:00 am
Secretary of State

02-28-2002 90070 023 ****61.25

Principal Place of Business

2115 HWY, 2321
SOUTHPORT, FL 32409

Mailing Address

2115 HWY 2321
SOUTHPORT FL 32409

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 04-0043100

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ERVIN PAGE
HWY 77 A
SOUTHPORT FL 32409

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE CDT
NAME TAYLOR, MICHAEL L
STREET ADDRESS 8821 SILVERLEAF AVE.
CITY-ST-ZIP PANAMA CITY FL 32409 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME TAYLOR, RONNIE
STREET ADDRESS 8825 SILVERLEAF AVE.
CITY-ST-ZIP SOUTHPORT FL 32409 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME MILLS, BOBBY
STREET ADDRESS 9405 Kingswood Rd
CITY-ST-ZIP Southport, FL 32409 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE D
NAME MERRITT, GERALD
STREET ADDRESS 2621 HIGHWAY 2321
CITY-ST-ZIP SOUTHPORT FL 32409 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE S
NAME MILLS, YANDA
STREET ADDRESS 9405 Kingswood rd
CITY-ST-ZIP Southport, FL 32409 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE D
NAME Bobby Austin
STREET ADDRESS 9404 Kingswood Rd.
CITY-ST-ZIP Southport, FL 32409 ☐ Change ☒ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael L Taylor
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(850) 265-0411

Date

Daytime Phone #

CR2E037 (9/01)