

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90023 038 ****61.25

DOCUMENT # 706349 1. Entity Name FLORIDA FIRE EQUIPMENT DEALERS ASSOCIATION, INC.					
Principal Place of Business 1530 METROPOLITAN BLVD TALLAHASSEE, FL 32308 US			Mailing Address 1530 METROPOLITAN BLVD TALLAHASSEE, FL 32308 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		Country	
6. Name and Address of Current Registered Agent WILLIS, MICHAEL R SR 3491 E HINSON AVE HAINES CITY, FL 33844				7. Name and Address of New Registered Agent Name J.T. Ipock Street Address (P.O. Box Number is Not Acceptable) 5863 W Beaver St City Jacksonville FL Zip Code 32254	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>J.T. Ipock</i></u> DATE <u>2/5/04</u> (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WILLS, MICHAEL R SR 3491 E HINSON AVE HAINES CITY, FL 33844	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P J.T. Ipock 5863 W Beaver St Jacksonville FL 322542868	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V IPOCK, JT 5863 W BEAVER ST JACKSONVILLE, FL 322542868	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Michael Bobik 3209 Knox McKae Dr Titusville FL 32780	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T AICLLO, DENNIS 4559 CARAMBOLA CIR S JACKSONVILLE, FL 322542868	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Dennis Aiello 4487 Carambola Cir S Coconut Creek FL 33066-2561	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOBIK, MICHAEL 3209 KNOX MCKAE DR POMPAÑO BEACH, FL 330662561	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Ted Bowersox 1701 South St Weesburg FL 34748	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AIELLO, DENNIS 4559 CARAMBOLA CIR S POMPAÑO BEACH, FL 330662561	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Paul Sherwood 37 Tupelo Ave Ft Walton Beach FL 32548	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GROSEFFI, JOHN 101 SW 6TH ST TITUSVILLE, FL 32781	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D John Groseffi 101 SW 6th St Ft Lauderdale FL 33301	☒ 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: <u><i>J.T. Ipock</i></u> <u>J.T. Ipock</u> <u>2/5/04</u> <u>904-695-4200</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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