





2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 24, 2008 8:00 am
Secretary of State

07-24-2008 90015 003 ****61.25

DOCUMENT # 706429 1. Entity Name PALM BEACH SHORES VOLUNTEER FIRE DEPARTMENT, INC.					
Principal Place of Business 247 EDWARDS LANE PALM BEACH SHORES, FL 33404				Mailing Address 247 EDWARDS LANE PALM BEACH SHORES, FL 33404	
2. Principal Place of Business - No P.O. Box # Same		3. Mailing Address SAME		40111971 	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State 		City & State 			
Zip 		Zip 			
4. FEI Number 59-6002801				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FAUCI, LARRY 1031 SINGER DRIVE RIVIERA BEACH, FL 33404				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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  7/21/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 CAHILL, WILLIAM 336 CLAREMONT LN PALM BEACH SHORES, FL 33404	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SILBER, DONALD 33 ROBALO CT NORTH PALM BEACH, FL 33408	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DEREVL, ROBY 214 CLAREMONT LN PALM BEACH SHORES, FL 33404	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LOIHLE, KENNETH J 115 CLAREMONT LN PALM BEACH SHORES, FL 33404	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIRRO, THOMAS 319 SANDAL LN PALM BEACH SHORES, FL 33404	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHENEY, BRAIN 220 LAKE SHORE DR. #4 PALM BEACH SHORES, FL 33404	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BANKS, KEVIN 225 CASCADE LN PALM BEACH SHORES, FL 33404	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DENGUIL, Roby 214 CLAREMONT LN PALM BEACH SHORES, FL 33404	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MATTHEI, SCOTT 337 EDWARDS LN PALM BEACH SHORES, FL 33404	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SILBER, DONALD 33 ROBALO CT NORTH PALM BEACH, FL 33408	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  LARRY J. FAUCI 7/21/08 561-373-9231 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT

706429

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Document Number 706429

Business Entity Name PALM BEACH SHORES VOLUNTEER FIRE DEPARTMENT, INC.

FEI Number 59 - 6002801

FEI Number Status ☒ Listed Above ☐ Applied For ☐ Not ApplicableCertificate of Status ☐ \$8.75 (Optional)Election Campaign Financing Trust Fund Contribution ☐ Yes ☒ No**Principal Place of Business**

Address 247 EDWARDS LANE (PO Box not acceptable)

Suite, Apt. #, etc.

City, State PALM BEACH SHORES, FL

Zip Code & Country 33404

Mailing Address

If your mailing address is the same as the principal address above, please check the box below. Otherwise, enter your mailing address.

☒ Mailing address same as principal address

Address 247 EDWARDS LANE

Suite, Apt. #, etc.

City, State PALM BEACH SHORES, FL

Zip Code & Country 33404

Name And Address of Registered Agent

Name (Last, First, Middle, Title) FAUCI, LARRY

- OR -

Business to serve as RA

Street Address In Florida 1031 SINGER DRIVE (PO Box not acceptable)

Suite, Apt. #, etc.

City, State RIVIERA BEACH, FL

Zip Code & Country

33404

US

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If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes.

Officer/Director Name And Address**Name And Address #1**

Title

P

Name (Last, First, Middle, Title)

CAHILL

WILLIAM

- OR -

Entity Name to serve as Officer/Director

Street Address

336 CLAREMONT LN

City, State

PALM BEACH SHORES

FL

Zip Code & Country

33404

Name And Address #2

Title

VP

Name (Last, First, Middle, Title)

DEREUIL

ROBY

- OR -

Entity Name to serve as Officer/Director

Street Address

214 CLAREMONT LN

City, State

PALM BEACH SHORES

FL

Zip Code & Country

33404

Name And Address #3

Title

S

Name (Last, First, Middle, Title)

MATTEI

SCOTT

- OR -

Entity Name to serve as Officer/Director

Street Address

337 EDWARDS LN.

City, State

PALM BEACH SHORES

FL

Zip Code & Country

33404

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#706429

Name And Address #4

Title TD

Name (Last, First, Middle, Title) BANKS KEVIN

- OR -

Entity Name to serve as Officer/Director

Street Address 225 CASCADE LN

City, State PALM BEACH SHORES FL

Zip Code & Country 33404

Name And Address #5

Title D

Name (Last, First, Middle, Title) PIRRO THOMAS

- OR -

Entity Name to serve as Officer/Director

Street Address 319 SANDAL LN

City, State PALM BEACH SHORES FL

Zip Code & Country 33404

Name And Address #6

Title D

Name (Last, First, Middle, Title) SILBER DONALD

- OR -

Entity Name to serve as Officer/Director

Street Address 33 ROBALO CT.

City, State NORTH PALM BEACH FL

Zip Code & Country 33408

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title RA

Officer/Director Signature 

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

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