FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 31 AM 10:24

DOCUMENT # 706436 (3)

1. Corporation Name
LEALMAN FIRE & RESCUE, INC.

Principal Place of Business	Mailing Address
4017 56TH AVE. NORTH ST PETERSBURG FL 33714	4017 56TH AVE. NORTH ST PETERSBURG FL 33714

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/18/1963
3a. Date of Last Report: 01/26/1994
4. FEI Number: 59-1203451 ☐ Applied For ☐ Not Applicable
2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)
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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

NEUBERGER, RICHARD C
4670 54TH AVE. N.
ST. PETERSBURG FL 33714

10. Name and Address of New Registered Agent

81 Name: Larry F. Bassett
82 Street Address (P.O. Box Number is Not Acceptable): 166 22nd Avenue NE
83
84 City: St. Petersburg FL 85 Zip Code: 33704

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: [signature] 01-17-95
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	CD
NAME	NEUBERGER, RICHARD
STREET ADDRESS	4670 54TH AVE N.
CITY-ST-ZIP	ST. PETERSBURG FL 33714
TITLE	D
NAME	MILLER, FRANCIS J
STREET ADDRESS	6900 29TH AVE. N.
CITY-ST-ZIP	ST. PETERSBURG FL 33710
TITLE	TD
NAME	DOBSON, GEORGE A
STREET ADDRESS	4797 49TH AVE. N.
CITY-ST-ZIP	ST. PETERSBURG FL 33714
TITLE	SD
NAME	CAMPBELL, LINDA L
STREET ADDRESS	7750 JUSTIN COURT
CITY-ST-ZIP	ST PETERSBURG, FL 00000 33709
TITLE	D
NAME	HARRIMAN, FRED W
STREET ADDRESS	4613 55TH AVE.N.
CITY-ST-ZIP	ST PETERSBURG, FL 00000 33714
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	2ndV/D	☒ Change ☐ Addition
1.2 NAME	Britner, David A.	
1.3 STREET ADDRESS	5016 62nd Street No.	
1.4 CITY-ST-ZIP	St. Petersburg, Fl 33709	
2.1 TITLE	T/D	☒ Change ☐ Addition
2.2 NAME	Johnson, Paul	
2.3 STREET ADDRESS	4550 39th Street No.	
2.4 CITY-ST-ZIP	St. Petersburg, Fl 33714	
3.1 TITLE	S/D	☒ Change ☐ Addition
3.2 NAME	Wolff, Gerald J.	
3.3 STREET ADDRESS	5200 28th Street No. Lot 609	
3.4 CITY-ST-ZIP	St. Petersburg, Fl 33714	
4.1 TITLE	P/D	☒ Change ☐ Addition
4.2 NAME	Campbell, Linda L	
4.3 STREET ADDRESS	7750 Justin Court No.	
4.4 CITY-ST-ZIP	St. Petersburg, Fl 33709	
5.1 TITLE	1stV/D	☒ Change ☐ Addition
5.2 NAME	Harriman, Fred W.	
5.3 STREET ADDRESS	4613 55th Avenue No.	
5.4 CITY-ST-ZIP	St. Petersburg, Fl 33714	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: [signature] Linda L. Campbell President 1-17-95 813-544-3438
SIGNATURE AND TYPED OR PRINTED NAME OF PERSON OFFICER OR DIRECTOR — Date — Daytime Phone #

0088388