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Feb 06 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **706816** (6)

1. Corporation Name

**SEBASTIAN VOLUNTEER FIRE DEPARTMENT AND RESCUE S  
QUAD, INC.**

Principal Place of Business

Mailing Address

1640 US !  
PO BOX 539  
SEBASTIAN FL 32958

1640 US 1  
PO BOX 539  
SEBASTIAN FL 32958

3. Date Incorporated or Qualified

02/11/1964

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCCOLLUM, NATHAN B.  
1448 LACONIA STREET  
SEBASTIAN FL 32958

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-29-98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SCHUM, GEORGE	
STREET ADDRESS	750 LAYPORT DRIVE	
CITY-ST-ZIP	SEBASTIAN FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	JOHNSON, FLOYD	
STREET ADDRESS	590 FUTCH WAY	
CITY-ST-ZIP	SEBASTIAN FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	DOUGHERTY, JACK	
STREET ADDRESS	1553 GLENTY LANE	
CITY-ST-ZIP	SEBASTIAN FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	EAGLE, STEVE	
STREET ADDRESS	131 MELTON AVENUE	
CITY-ST-ZIP	SEBASTIAN FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	JONES, ROGER	
STREET ADDRESS	381 MIDVILLE TERRACE	
CITY-ST-ZIP	SEBASTIAN FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	MCCOLLUM, NATHAN	
STREET ADDRESS	1448 LACONIA STREET	
CITY-ST-ZIP	SEBASTIAN FL	

1.1 TITLE	MS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Swingle, Mary	
1.3 STREET ADDRESS	650 SW Stephenson Ave	
1.4 CITY-ST-ZIP	Sebastian, FL 32958	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Swingle, James	
3.3 STREET ADDRESS	650 SW Stephenson Ave	
3.4 CITY-ST-ZIP	Sebastian, FL 32958	
4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 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:

*Nathan McCollum*  
Signature, typed or printed name of signing officer or director

1-29-98

561-589-8830

CR2E037 (10/97)