2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 31, 2005
Secretary of State

DOCUMENT# 707121

Entity Name: OCEANWAY VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:

202 OCEANWAY AVENUE
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

202 OCEANWAY AVENUE
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 59-1009502 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

YOUNG, ROBERT A.
601 RENNE DRIVE NORTH
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	SD	( ) Delete
Name:	POPE, HEATHER	
Address:	1705 JAKE RD	
City-St-Zip:	JACKSONVILLE, FL 32218	
Title:	TD	( ) Delete
Name:	YOUNG, ROBERT A.	
Address:	601 RENNE DR N	
City-St-Zip:	JACKSONVILLE, FL 00000,	
Title:	VPD	( ) Delete
Name:	EVANS, RANDY	
Address:	11924 AARON RD	
City-St-Zip:	JACKSONVILLE, FL 32218	
Title:	PD	( ) Delete
Name:	STEVEN, SHAW	
Address:	447 ERIC AVE.	
City-St-Zip:	JACKSONVILLE, FL 32218	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT A. YOUNG TD 05/31/2005

Electronic Signature of Signing Officer or Director — Date