

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 08:00 AM
Secretary of State

DOCUMENT # 707371

1. Entity Name
ALVA VOLUNTEER FIRE DEPARTMENT INC



Principal Place of Business

2660 STYLES RD
P.O. BOX 847
ALVA, FL 33920 US

Mailing Address

2660 STYLES RD
P.O. BOX 847
ALVA, FL 33920 US



01062005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1705488

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

MELOY, PAUL F.
3101 STYLES ROAD
ALVA, FL 33920

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

U00000299099
04/11/05 80036-002 61.25

10. OFFICERS AND DIRECTORS

TITLE	PC
NAME	MELOY, PAUL F.
STREET ADDRESS	3101 STYLES ROAD
CITY-ST-ZIP	ALVA, FL
TITLE	V
NAME	ZENGEL, EDWARD
STREET ADDRESS	19691 NORTH AVER ROAD
CITY-ST-ZIP	ALVA, FL
TITLE	S
NAME	LIPPINCOTT, OWEN
STREET ADDRESS	14144 CARIBBEAN BLVD
CITY-ST-ZIP	FT. MYERS, FL
TITLE	T
NAME	PHELPS, DAVE A.
STREET ADDRESS	2901 STYLES ROAD
CITY-ST-ZIP	ALVA, FL
TITLE	D
NAME	TINER, ROBERT J
STREET ADDRESS	1900 SUNSET TRAIL
CITY-ST-ZIP	ALVA, FL 33920
TITLE	D
NAME	PETERSON, BRIAN
STREET ADDRESS	2660 STYLES ROAD
CITY-ST-ZIP	ALVA, FL 33920

**DO NOT WRITE
IN THIS SPACE**

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

Paul F. Meloy