

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2008 8:00 am
Secretary of State

07-07-2008 90001 008 ****61.25

DOCUMENT # 708360

1. Entity Name
SOUTHWEST VOLUNTEER FIRE DEPARTMENT, INC.



Principal Place of Business
**CORNER OF PARK AND BALSAM STREETS
PO BOX 1646
PALATKA, FL 32178-1646 US**

Mailing Address
**CORNER OF PARK AND BALSAM STREETS
PO BOX 1646
PALATKA, FL 32178-1646 US**

40109558



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03232008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-1857090

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BEATON, LAURENCE F.
627 CRILL AVENUE
PALATKA, FL 32177-2139**

Name

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

City

FL

Zip Code

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, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$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 **SD** ☐ Delete
NAME **BEATON, ROBERT A.**
STREET ADDRESS **139 CABLE ROAD**
CITY-ST-ZIP **PALATKA, FL**

TITLE **VD** ☐ Change ☒ Addition
NAME **BELLAMY, JONATHAN**
STREET ADDRESS **108 SHERRI LANE**
CITY-ST-ZIP **PALATKA, FL 32177**

TITLE **D** ☒ Delete
NAME **STEINMETZ, RICHARD A**
STREET ADDRESS **2632 SILVER LAKE DRIVE**
CITY-ST-ZIP **PALATKA, FL**

TITLE **D** ☐ Change ☒ Addition
NAME **CLARK, RICHARD**
STREET ADDRESS **120 RACHEL ROAD**
CITY-ST-ZIP **PALATKA, FL 32177**

TITLE **D** ☒ Delete
NAME **LANE, RONALD E.**
STREET ADDRESS **227 SILVER LAKE ROAD**
CITY-ST-ZIP **PALATKA, FL**

TITLE **D** ☐ Change ☒ Addition
NAME **JONES, CHAN**
STREET ADDRESS **112 GRAINGER LANE**
CITY-ST-ZIP **PALATKA, FL 32177**

TITLE **D** ☐ Delete
NAME **CHAMPION, TRAVIS P**
STREET ADDRESS **143 SPORTSMAN ROAD**
CITY-ST-ZIP **SATSUMA, FL 32189**

TITLE **D** ☐ Change ☒ Addition
NAME **TRABER, KIMBERLY**
STREET ADDRESS **171 COUNTY ROAD 309C**
CITY-ST-ZIP **PALATKA, FL 32177**

TITLE **D** ☒ Delete
NAME **LASSITER, LARRY E**
STREET ADDRESS **279 E PENIEL RD**
CITY-ST-ZIP **PALATKA, FL**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☐ Delete
NAME **CLARK, JOSEPH J**
STREET ADDRESS **105 HIGHLAND AVENUE**
CITY-ST-ZIP **PALATKA, FL 32177**

TITLE **PD** ☒ Change ☐ Addition
NAME **CLARK, JOSEPH J**
STREET ADDRESS **2108 KIRBY STREET**
CITY-ST-ZIP **PALATKA, FL 32177**

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:

Robert A. Beaton

Robert A. Beaton

4/8/2008

(386) 329-0869

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary

Date

Daytime Phone #