

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 709100 (2)
1. Corporation Name
HALIFAX VOLUNTEER FIREMENS ASSOCIATION AND RESCUE SQUAD, INC.

100001821201
-05/14/96--01127--002
*****70.00 *****70.00



Principal Place of Business
**1288 8TH ST.
DAYTONA BCH FL 32117
US**

Mailing Address
**E SQUAD, INC.
PO BOX 730065D
ORMOND BCH FL 32173-0065
US**

3. Date Incorporated or Qualified
06/08/1965

3a. Date of Last Report
07/20/1995

4. FEI Number
NOT APPLICABLE

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

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

**WALKER, RONALD S
3601 EAGLE ROCK
ORMOND BCH FL 32174**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City

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 of the registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
D	CASE, WILLIAM R	1561 CULVERHOUSE DR.	HOLLY HILLS FL	<input type="checkbox"/>
D	MYLES, ALFRED	1208 PINERIDGE DR	HOLLY HILL FL	<input checked="" type="checkbox"/>
D	ZIMMER, RAYMOND	959 GARDENIA	DAYTONA BCH FL	<input type="checkbox"/>
V	LALONDE, LLOYD	RT 34 TWIN RIVER DR.	ORMOND BEACH FL	<input checked="" type="checkbox"/>
T	JENNETTEN, MARC S	1207 DENECEE TERR	HOLLY HILL FL 18	<input checked="" type="checkbox"/>
P	JEWELL, DAVID	610 ORCHARD AVE	ORMOND BEACH FL	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
V	MYLES, ALFRED	1208 PINERIDGE DR	HOLLY HILL FL	<input type="checkbox"/>
D	LALONDE, LLOYD	RT 34 TWIN RIVER DRIVE	ORMOND BEACH, FL	<input type="checkbox"/>
T	LASHMET, KENNETH	1365 HARDEN RD	PORT ORANGE, FL	<input type="checkbox"/>
P	RONALD S. WALKER	3601 EAGLE WALKER	ORMOND BEACH 32174	<input type="checkbox"/>

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)(k), 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: *Ronald S. Walker*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 1, 1996 9846739131
Date Date of Filing

CR2E037 (12/95)