

FILE NOW: FILING FEE IS \$61.25

FILED

May 14 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 # 709100 (2)

1. Corporation Name

HALIFAX VOLUNTEER FIREMENS ASSOCIATION AND RESCUE SQUAD, INC.



Principal Place of Business

Mailing Address

1208 8TH ST.  
DAYTONA BCH FL 32117  
US

HALIFAX VOL FIREMENS & ASSOC.  
PO BOX 730065D  
ORMOND BCH FL 32173-0065  
US

3. Date Incorporated or Qualified

06/08/1965

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

28 Zip Country

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WALKER, RONALD S  
3801 EAGLE ROCK  
ORMOND BCH FL 32174

DELETE

81 Name

Lloyd Lalonde

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

34 TWIN RIVER DRIVE

83

Route 6

84 City

ORMOND BEACH

FL

85 Zip Code

32174

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 GAYLE JENNETTEN

SECRETARY

4-13-98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME CASE, WILLIAM R  
STREET ADDRESS 1561 CULVERHOUSE DR.  
CITY-ST-ZIP HOLLY HILLS FL ☒ DELETE

1.1 TITLE DIRECTOR ☒ Change ☐ Addition  
1.2 NAME DAVID Y. JEWELL  
1.3 STREET ADDRESS 610 ORCHARD AVE.  
1.4 CITY-ST-ZIP ORMOND BEACH, FL. 32174

TITLE V  
NAME MYLES, ALFRED  
STREET ADDRESS 1208 PINERIDGE DR  
CITY-ST-ZIP HOLLY HILL FL ☐ DELETE

2.1 TITLE VICE-PRESIDENT ☒ Change ☐ Addition  
2.2 NAME RICHARD J. BELTRAMI  
2.3 STREET ADDRESS 1108 VALENCIA AVE.  
2.4 CITY-ST-ZIP HOLLY HILLS, FL. 32117

TITLE BD  
NAME JEWELL, DAVID  
STREET ADDRESS 610 ORCHARD AVE  
CITY-ST-ZIP ORMOND FL ☐ DELETE

3.1 TITLE DIRECTOR ☒ Change ☐ Addition  
3.2 NAME BENNY RAWLINS  
3.3 STREET ADDRESS 1055 INDIAN LAKE RD.  
3.4 CITY-ST-ZIP DAYTONA BEACH, FL. 32124

TITLE D  
NAME LALONDE, LLOYD  
STREET ADDRESS RT 6 - 34 TWIN RIVER DRIVE  
CITY-ST-ZIP ORMOND BEACH FL ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE T  
NAME LASHMET, KENNETH  
STREET ADDRESS 1385 HARNDEN RD  
CITY-ST-ZIP PORT ORANGE FL ☒ DELETE

5.1 TITLE TREASURER ☒ Change ☐ Addition  
5.2 NAME GEORGE B. TOLBERT  
5.3 STREET ADDRESS 1233 DERBYSHIRE RD.  
5.4 CITY-ST-ZIP HOLLY HILL, FL. 32117

TITLE P  
NAME WALKER, RONALD S  
STREET ADDRESS 3801 EAGLE WALKER  
CITY-ST-ZIP ORMOND BEACH FL 32174 ☒ DELETE

6.1 TITLE PRESIDENT ☒ Change ☐ Addition  
6.2 NAME ALFRED MYLES  
6.3 STREET ADDRESS 932 OLEANDER AVE.  
6.4 CITY-ST-ZIP HOLLY HILL, FL. 32117

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

Alfred Myles Sr Pres

4-13-98 (encl) 7/17-98

CP2E037 (10/97)