

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 27, 2001 8:00 am
Secretary of State

03-27-2001 90053 002 ****61.25

DOCUMENT # 709305

1. Entity Name

MICANOPY FIRE DEPT., INC.

Principal Place of Business

704 N.E. CHOLOKKA BLVD.
P O BOX 409
MICANOPY FL 32667-0409
US

Mailing Address

PO BOX 409
MICANOPY FL 32667-0409
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1285912

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

IRWIN, PHILIP
353 NW 3RD AVE
MICANOPY FL 32667

7. Name and Address of New Registered Agent

Name Talley, Joseph P.

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

7016 SE 176th Street

City Hawthorne

FL

Zip Code 32640

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.

SIGNATURE

Joseph P. Talley

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE DT ☐ Delete
NAME IRWIN, PHILIP
STREET ADDRESS 353 EESTAUWALKEE AVE
CITY-ST-ZIP MICANOPY FL 32667

TITLE DP ☐ Delete
NAME TAYLOR, ROBERT SR.
STREET ADDRESS S.R. 234 CHOLOKKA BLVD.
CITY-ST-ZIP MICANOPY FL 32667

TITLE D ☐ Delete
NAME TALLEY, JOSEPH P
STREET ADDRESS P O BOX 1344
CITY-ST-ZIP HAWTHORNE FL 32640

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Change ☐ Addition
NAME Irwin, Philip
STREET ADDRESS 353 EESTAUWALKEE AVE
CITY-ST-ZIP MICANOPY FL 32667

TITLE D ☒ Change ☐ Addition
NAME Taylor, Robert SR.
STREET ADDRESS 911A NE Chokolka Blvd
CITY-ST-ZIP MICANOPY, FL 32667

TITLE DP/T ☒ Change ☐ Addition
NAME Talley, Joseph P.
STREET ADDRESS 7016 SE 176th Street
CITY-ST-ZIP Hawthorne, FL 32640

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

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

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

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

Joseph P. Talley (Joseph P. Talley) March 27, 2001 (352) 466-3741

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)

0021342