

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709549

FILED
Feb 21, 2011
Secretary of State

Entity Name: STOCK ISLAND VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:

18 ROBERTA STREET, SI
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

18 ROBERTA STREET, SI
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 59-2239339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOLSOM, WALLACE L.
26A 12TH AVE., S.I.
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: VD
Name: LAMBERSON, ALLAN T
Address: C12 9TH AVE S I
City-St-Zip: KEY WEST, FL 33040

Title: D
Name: JARRELLS, KENNETH J
Address: 14 LUNA LN B C
City-St-Zip: KEY WEST, FL 33040

Title: STD
Name: GALLOWAY, MARIE L
Address: 18 ROBERTA STREET SI
City-St-Zip: KEY WEST, FL

Title: D
Name: GALLOWAY, PAUL L.
Address: 18 ROBERTA ST., SI.
City-St-Zip: KEY WEST, FLORIDA 00000,

Title: PD
Name: FOLSOM, WALLACE L.
Address: 26A-12TH AVENUE, SI
City-St-Zip: KEY WEST, FL 00000,

Title: D
Name: MARA, FRANK E
Address: 101 ROYS TRL PRK SI
City-St-Zip: KEY WEST, FL 00000,

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARIE GALLOWAY

STD

02/21/2011

Electronic Signature of Signing Officer or Director

Date