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Apr 30 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra S. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **709830** (4)
1. Corporation Name
SWITZERLAND VOLUNTEER FIRE DEPARTMENT, INC.



Principal Place of Business 2059 STATE ROAD 13 JACKSONVILLE FL 32259-9256 SWITZERLAND, FL 32259		Mailing Address 2059 STATE ROAD 13 JACKSONVILLE FL 32259-9256 SWITZERLAND, FL 32259		3. Date Incorporated or Qualified 10/28/1965
2. Principal Place of Business 21		2a. Mailing Address 26		4. FEI Number 59-2959604
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
City & State 23		City & State 28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
9. Name and Address of Current Registered Agent WHITE, NEALY 1620 RAINCROW DRIVE JACKSONVILLE FL 32259				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

81 Name WHITE, NEALY	85 Zip Code FL 32259
82 Street Address (P.O. Box Number is Not Acceptable) 1620 RAINCROW DR.	
83	
84 City Switzerland	

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 ☒ 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 NAME STREET ADDRESS CITY - ST - ZIP	PD WHITE, NEALY 1620 RAINCROW DRIVE JACKSONVILLE FL 32259	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	PD Switzerland, FLA. 32259
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD GLAWN, MARY 880 GROVE BLUFF CIRCLE, N JACKSONVILLE FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	SD LOREHA McDonnell 726 ST. MORITZ CT. SWITZERLAND, FL 32259
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD HATELY, JOHN 472 FRUIT COVE RD. JACKSONVILLE FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	VD HATLEY, JOHN Fruit Cove, FLA. 32259
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MARX, CARL 1140 HOLLYBERRY LANE JACKSONVILLE FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	D Switzerland, FLA. 32259
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D QUINTON TAPLEY 1197 WEDGEWOOD ROAD JACKSONVILLE FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	D Robin E. Gruney 2333 MARLEE RD S. SWITZ. FLA 32259
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD SPEELMAN, VICKI 1380 SCOTT RD. SWITZERLAND FL	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	TD Vicki A. Speelman 1380 Scott Rd Switzerland, FL 32259

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: ☒ **Michael M. Mortham** 4-21-98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # none

CR2E037 (10/97)