

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 709830

1. Entity Name

SWITZERLAND VOLUNTEER FIRE DEPARTMENT, INC.

FILED
Feb 26, 2000 8:00 am
Secretary of State

02-26-2000 90028 028 ****70.00

Principal Place of Business

Mailing Address

1120 SHEFFIELD RD
SWITZERLAND FL 32259
US

1120 SHEFFIELD RD
SWITZERLAND FL 32259-9091
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2959604

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHITE, NEALY
1620 RAINCROW DRIVE
SWITZERLAND FL 32259

Name

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

City

FL

Zip Code

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME WHITE, NEALY
STREET ADDRESS 1620 RAINCROW DRIVE
CITY-ST-ZIP SWITZERLAND FL 32259

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

TITLE SD ☐ Delete
NAME MCDONNELL, LORETTA
STREET ADDRESS 726 ST MORITZ CT
CITY-ST-ZIP SWITZERLAND FL 32259

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

TITLE CD ☐ Delete
NAME HATLEY, JOHN
STREET ADDRESS 472 FRUIT COVE RD.
CITY-ST-ZIP FRUIT COVE FL 32259

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

TITLE D ☐ Delete
NAME GAINEY, ROBIN R
STREET ADDRESS 2333 MARLEE RD S
CITY-ST-ZIP SWITZERLAND FL 32259

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

TITLE TD ☐ Delete
NAME SPEELMAN, VICKI A
STREET ADDRESS 1380 SCOTT RD
CITY-ST-ZIP SWITZERLAND FL 32259

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

TITLE ☐ Delete
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:

Robert A. Fournier
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-15-2000 287-0044 #2

CR2E037 (9/99)