

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711181

FILED
Feb 15, 2010
Secretary of State

Entity Name: SUN CITY CENTER EMERGENCY SQUAD #1, INC.

Current Principal Place of Business:

101 RAY WATSON DR.
SUN CITY CENTER, FL 33573

New Principal Place of Business:

Current Mailing Address:

101 RAY WATSON DRIVE
SUN CITY CENTER, FL 33573

New Mailing Address:

101 RAY WATSON DR.
SUN CITY CENTER, FL 33573

FEI Number: 59-1147811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DONALD LINSKY ATTORNEY AT LAW
1509-B SUN CITY CENTER PLAZA
SUN CITY CENTER, FL 33573 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: CEO
Name: JACKSON, MICHAEL
Address: 101 RAY WATSON DR
City-St-Zip: SUN CITY CENTER, FL 33573

Title: V
Name: WOLFERT, KEN
Address: 101 RAY WATSON DR
City-St-Zip: SUN CITY CENTER, FL 33573

Title: TD
Name: SCHRAMM, MICHAEL C
Address: 1202 DESERT HILLS DR
City-St-Zip: SUN CITY CENTER, FL 33573

Title: S
Name: HODGKIN, VIVIAN
Address: 101 RAY WATSON DR
City-St-Zip: SUN CITY CENTER, FL 33573

Title: V
Name: EAST, LINDA
Address: 101 RAY WATSON DR
City-St-Zip: SUN CITY CENTER, FL 33573

Title: V
Name: SIMON, DIANE
Address: 101 RAY WATSON DR.
City-St-Zip: SUN CITY CENTER, FL 33573

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: MICHAEL SCHRAMM

TREA

02/15/2010

Electronic Signature of Signing Officer or Director

Date