

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711232

FILED
Jan 13, 2008
Secretary of State

Entity Name: THE SUGAR LOAF KEY VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:

17175 OVERSEAS HIGHWAY
SUGARLOAF KEY, FL 33042 US

New Principal Place of Business:

Current Mailing Address:

17175 OVERSEAS HIGHWAY
SUGARLOAF KEY, FL 33042 US

New Mailing Address:

FEI Number: 59-2311592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOVEDA, JOE E
17175 OVERSEAS HIGHWAY
SUGARLOAF KEY, FL 33042 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: P () Delete
Name: BOVEDA, JOE E
Address: 17175 OVERSEAS HIGHWAY
City-St-Zip: SUGARLOAF KEY, FL 33042

Title: 1VP () Delete
Name: BONAR, ERIK
Address: 17175 OVERSEAS HIGHWAY
City-St-Zip: SUGARLOAF KEY, FL 33042

Title: 2VP () Delete
Name: BOVEDA, CHRIS J
Address: 17175 OVERSEAS HIGHWAY
City-St-Zip: SUGARLOAF KEY, FL 33042

Title: T () Delete
Name: GIRARD, KEVIN
Address: 17175 OVERSEAS HIGHWAY
City-St-Zip: SUGARLOAF KEY, FL 32042

Title: S () Delete
Name: ADAIR, BOB
Address: 17175 OVERSEAS HIGHWAY
City-St-Zip: SUGARLOAF KEY, FL 33042

Title: CD () Delete
Name: BOWDEN, MICHAEL W
Address: 17175 OVERSEAS HIGHWAY
City-St-Zip: SUGARLOAF KEY, FL 33042

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MICHAEL W. BOWDEN

CD

01/13/2008

Electronic Signature of Signing Officer or Director

Date