2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 24, 2009
Secretary of State

DOCUMENT# 711732

Entity Name: FLORAHOME-GRANDIN VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:

201 WEST OHIO STREET
FLORAHOME, FL 32140 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 222
FLORAHOME, FL 32140 US

New Mailing Address:

FEI Number: 59-1797080 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PRICE, RON
105 N CEDAR AVE
FLORAHOME, FL 32140 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:	S	( ) Delete
Name:	KERN, COLLEEN	
Address:	250 TANNER SCHOOL BUS RD	
City-St-Zip:	FLORAHOME, FL 32140	
Title:	T	( ) Delete
Name:	STEELE, LISA	
Address:	P.O. BOX 182	
City-St-Zip:	FLORAHOME, FL 32140	
Title:	D	( ) Delete
Name:	JAMES, BILL	
Address:	106 INDIAN LAKE LANE	
City-St-Zip:	FLORAHOME, FL	
Title:	D	( ) Delete
Name:	BOHANON, CANDACE	
Address:	405 MAGNOLIA AVE	
City-St-Zip:	FLORAHOME, FL 32140	
Title:	V	( ) Delete
Name:	WEAVER, DANIEL	
Address:	405 MAGNOLIA AVE	
City-St-Zip:	FLORAHOME, FL 32140	
Title:	P	( ) Delete
Name:	PRICE, RONALD	
Address:	105 NORTH CEDAR AVENUE PO BOX 337	
City-St-Zip:	FLORAHOME, FL 32140	

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:	V	(X) Change ( ) Addition
Name:	PHILLIPS, JOHN A JR	
Address:	144 GOODSON PRAIRIE RD	
City-St-Zip:	PUTNAM HALL, FL 32185	
Title:	P	(X) Change ( ) Addition
Name:	WEAVER, DANIEL	
Address:	105 NORTH CEDAR AVENUE PO BOX 337	
City-St-Zip:	FLORAHOME, FL 32140	

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: RON PRICE CH 06/24/2009
Electronic Signature of Signing Officer or Director — Date