

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711732

FILED  
Apr 12, 2012  
Secretary of State

**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 ( )**

**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  
Name: UNDERWOOD, COLLEEN  
Address: 250 TANNER SCHOOL BUS RD  
City-St-Zip: FLORAHOME, FL 32140

Title: T  
Name: WEAVER, CANDACE  
Address: 405 MAGNOLIA AVE.  
City-St-Zip: FLORAHOME, FL 32140

Title: D  
Name: WEAVER, NAOMIE  
Address: 107 E. TENNESSEE ST.  
City-St-Zip: FLORAHOME, FL 32140

Title: D  
Name: UNDERWOOD, JAMES  
Address: 250 TANNER SCHOOL BUS RD.  
City-St-Zip: FLORAHOME, FL 32140

Title: V  
Name: PHILLIPS, JOHN A JR  
Address: 144 GOODSON PRAIRIE RD  
City-St-Zip: PUTNAM HALL, FL 32185

Title: P  
Name: WEAVER, DANIEL  
Address: 405 MAGNOLIA AVE.  
City-St-Zip: FLORAHOME, FL 32140

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: RON PRICE

CHIE

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date