## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1007



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

S. Dute incorporated or Quellified Sa. Date of Each Report C50/01/1998  E. Principal Piace of Business		1337						
CRESCENT BEACH VOLUNTEER FIRE DEPARTMENT, INC.  **Imminish Place of Business**  **Mahing Address**  **SALA SOUTH** **A MUSISHER FL 32096**  **SE ALA SOUTH**  **SE ALA SOUTH**	DOCU	MENT # 71886	1 (8	.)				
### AUGUSTINE FL 2006	•		FIDE DEGARDINE	,				
Abung Address  SA AL SOUTH  1 AUGUSTINE FL 32086  S. Date Incorporated or Qualified  Incorporated or Qualified  S. Date Incorporated or Qualified  Incorporated or Qualified  Incorporated or Qualified  Incorporated or Qualified  S. Date Incorporated or Qualified  Incorporated or Status Desired  Incorporated or Status Desi	CHESC	SENT BEACH VOLUNTEER	FIRE DEPARTME	NI, INC.		L 168(SL)6866 11891 1818L 1811 1811	MA CONTRACTOR CONTRACTOR	<b>4</b> 0 <b>416</b> 1 ( <b>4.1</b> )
Abung Address  SA AL SOUTH  1 AUGUSTINE FL 32086  S. Date Incorporated or Qualified  Incorporated or Qualified  S. Date Incorporated or Qualified  Incorporated or Qualified  Incorporated or Qualified  Incorporated or Qualified  S. Date Incorporated or Qualified  Incorporated or Status Desired  Incorporated or Status Desi							)]])	(1)))
STAUGUSTINE FL 32088  STAUGUSTINE FL 32088  3. Date incorporated or Qualified  3. Date of Last Report  CRY 6. State  2. Mailing Address  3. Date incorporated or Qualified  3. Date of Last Report  CRY 6. State  3. Date of Last Report  CRY 6. State  3. Date of Last Report  2. Suite, Apt. 4, etc.  2. Suite, Apt. 4, etc.  2. Suite, Apt. 4, etc.  2. Cry 6. State  3. Country  2. Country  2. Country  3. Country  4. Election Compaling Financing  5. Certificate of Status Desired  3. Certificate of	Principal Plac	ce of Business	Mailing Address			) IDDAN ISBUITING INDA INDA INDA	ALBI BERLY BEDEL BERLE BERLE BE	ANI DITH BATT
S. Date incorporated or Qualified  3. Date incorporated or Qualified  3. Date incorporated or Qualified  3. Date of Last Report  (5)/1/1970  28 SAPTIC  28 SAPTIC  29 Solide Apt 4, etc.  29 Solide Apt 4, etc.  27 County  29 Solide Apt 4, etc.  20 City 6 State  20 City 6 State  21 County  22 County  22 County  23 30 Price State  3. This corporation has liability for interplate by under s. 198 032.  Price State  3. This corporation has liability for interplate by under s. 198 032.  Price State  3. This corporation has liability for interplate by under s. 198 032.  Price State  3. This corporation has liability for interplate by under s. 198 032.  Price State  3. This corporation has liability for interplate by under s. 198 032.  Price State  3. This corporation has liability for interplate by under s. 198 032.  Price State  3. This corporation has liability for interplate by under s. 198 032.  Price State  3. This corporation has liability for interplate by under s. 198 032.  Price State  3. This corporation has liability for interplate by under s. 198 032.  Price State  3. This corporation has liability for interplate by the under s. 198 032.  Price State  3. This corporation has liability for interplate by the septiment of the provision of States and States	5865 A1A SOU	пн	5865 A1A SOUTH					
3. Date incorporated of Qualified   Sa. Date of Lest Papent   Sp. 17/15/1970   Sp. 17/15/15/1970   Sp. 17/15/1970   Sp. 17/15/15/1970   Sp. 17/15/15/15/15/15/15/15/15/15/15/15/15/15/	ST AUGUSTINE FL 32086 ST AUGUSTINE FL 32084-76			32084-7015		}		
Principal Pione of Business   2a	US		US					
SAME  29	6.05*****	N 1D	1.00					
Suite. Apt. #. etc.    Suite. Apt. #. etc.   27   27   27   27   28   28   30   30   30   30   30   30   30   3							<del> </del>	
City & State		<del>7/1/4</del>		T			60 75	
City & State   City & State   City & State   Country   28   Country   29   Country   29   Country   29   Country   29   Country   29   Country   29   Country   20   Countr	22		27			5. Certificate of Status Desired	1 7 7	
Zip Country Zip Country B. This corporation has liability for intengible tax under s. 199.032. Provide Statutes so See No. No. 9. Name and Address of Current Registered Agent  ORSINI, RICHARD G. 105.15TH ST ST AUGUSTINE FL 32084  82 Street Address (P.O. Box Number is Not Acceptable)  15 Name and Address of New Registered Agent  16 Street Address (P.O. Box Number is Not Acceptable)  17 Fursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lits registered discort registered agent or South in the State of Florida. Such change ease self-office by the corporation's board of directors. Thereby scoopt the appointment as registered directors and in minimar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature in the purpose of changing lits registered by the corporation's board of directors. Thereby scoopt the appointment as registered directors and in minimar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature in the purpose of changing lits registered by the corporation's board of directors. Thereby scoopt the appointment as registered directors. Thereby scoopt the appointment as registered by the corporation's board of directors. Thereby scoopt the appointment as registered by the corporation's board of directors. Thereby scoopt the appointment as registered by the corporation's board of directors. Thereby scoopt the appointment as registered by the corporation's board of directors. Thereby scoopt the appointment as registered directors. Thereby	City & Sta	ite	City & State			,		
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Sections  10. Name and Address of New Section of New Registered Agent  10. Name and Address of New Section of New Section of N	710	Country			Interi			
9. Name and Address of Current Registered Agent  ORSINI, RICHARD G. 105 15TH ST ST AUGUSTINE FL 32084  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City FL S5 Zip Code  17. Pursuant to the provisions of Sealons 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and sealons of florida. Such change was authorized by the corporation's board of directors. I hereby accept the exponitment as registered agent, and sealons of sealons of florida. Such change was authorized by the corporation's board of directors. I hereby accept the exponitment as registered agent, and the suppose of changing its registered office or registered agent, and the suppose of changing its registered office or registered agent, and the suppose of changing its registered office or registered agent, and the suppose of changing its registered office or registered agent, and the suppose of changing its registered office or registered agent, and the suppose of changing its registered office or registered office or registered agent, and the supposition of Section 617 0503, Plorida Statutes.  SIGNATURE  102.	24	—	<u>⊢</u> ¬ ′		ишу			. 199.032,
ORSINI, RICHARD G. 105 15TH ST ST AUGUSTINE FL 32084  82 Street Address (P.O. Box Number is Not Acceptable)  83 City FL 85 Zip Code  FL 85 Zip				1301	<u> </u>			<del></del>
105 15TH ST ST AUGUSTINE FL 32084    B3					81 Name			
ST AUGUSTINE FL 32084    63	ORSINI,	RICHARD G.			82 Street	Address (P.O. Box Number is Not Accepta	ble)	<del>"</del>
B4   City								<del></del>
III. Fursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, am familiar with, end accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature with appear or present name of registered agent and title if appeadate (NOTE Registered Agent algoritum required when rehistance)  DATE  Signature inpect or present name of registered agent and title if appeadate (NOTE Registered Agent algoritum required when rehistance)  DATE  TO OFFICERS AND DIRECTORS IN 12  THE HACHMEISTER, ETHELYN  12. DELETE 1.1 TITLE  1.2 TITLE  DAVID HOPKINS  STAUGUSTINE, FL 00000  DAVID HOPKINS  STAUGUSTINE, FL 00000  DAVID HOPKINS  STAUGUSTINE FL  DAVID HOPKINS  STAUGUSTINE FL  DAVID HOPKINS  STAUGUSTINE FL  DELETE 3.1 TITLE  DAVID HOPKINS  STAUGUSTINE FL  Change Addition  3.3 STRET ADDRESS  STAUGUSTINE FL  Change Addition  Addition  Addition  Addition  Addition  Addition  ADDRESS STAUGUSTINE, FL 00000  ADDRESS STAUGUSTINE, FL	ST AUG	BUSTINE FL 32084			83			
I. Fusuant to the provisions of Sections 617,0502 and 617,1508, Revida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby sceept the appointment as registered agent, and accept the obligations of, Section 617,0503, Florida Statutes.    International Computer of the Collegations of Section 617,0503, Florida Statutes.					84 City		85 Zip	Code
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14. If do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section (19.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an anachment with an address.

**6.3 STREET ADDRESS** 

STREET ADDRESS

**5865 A1A SOUTH** 

904)471-0116

**FILED** 

Apr 18 1997 8:00am

Secretary of State