

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **722390** (2)

1. Corporation Name

THE NORTHWEST SIDE VOLUNTEER FIRE DEPARTMENT, IN C.

Principal Place of Business

Mailing Address

**2311 MICHIGAN AVE (PANAMA CITY, FL 32405)
P.O. BOX 15184
PANAMA CITY FL 32406-0184**

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P.O. BOX 15184
PANAMA CITY FL 32406-0184**

3. Date Incorporated or Qualified

01/08/1972

4. FEI Number

59-6000512

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**TERI FORREST
1404 BUENA VISTA BLVD.
PANAMA CITY FL 32401**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant 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 office or 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. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☒ DELETE
NAME **WHITMER, ROBERT**
STREET ADDRESS **2507 DRUMMOND AVE**
CITY-ST-ZIP **PANAMA CITY FL**

1.1 TITLE **D** ☐ Change ☒ Addition
1.2 NAME **Steve Garrick**
1.3 STREET ADDRESS **3401 W. 15th Street**
1.4 CITY-ST-ZIP **Panama City, FL 32401**

TITLE **TD** ☐ DELETE
NAME **FORREST, TERI**
STREET ADDRESS **1404 BUENA VISTA BLVD.**
CITY-ST-ZIP **PANAMA CITY FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **P** ☒ DELETE
NAME **ROACH, ROY**
STREET ADDRESS **1614 FAIRLAND AVE**
CITY-ST-ZIP **PANAMA CITY FL**

3.1 TITLE **P** ☐ Change ☒ Addition
3.2 NAME **Bob minneman**
3.3 STREET ADDRESS **2345 Frankford Ave**
3.4 CITY-ST-ZIP **Panama City, FL 32405**

TITLE **C** ☐ DELETE
NAME **WISE, DARREL**
STREET ADDRESS **3923 W. 21ST PLACE**
CITY-ST-ZIP **PANAMA CITY FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **AC** ☐ DELETE
NAME **FORREST, RANDY**
STREET ADDRESS **1404 BUENA VISTA BLVD**
CITY-ST-ZIP **PANAMA CITY FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **MOCK, JOHN**
STREET ADDRESS **409 AIRPORT RD LOT 15**
CITY-ST-ZIP **PANAMA CITY FL**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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 or 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 attachment with an address.

SIGNATURE: **Darrel Wise**

4-15-98

BSO 769-3782

CR2E037 (10/97)