

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90078 009 ****61.25

DOCUMENT # 723102

1. Entity Name

RAINBOW LAKES VOLUNTEER FIRE DEPARTMENT, INC

Principal Place of Business

Mailing Address

**LAKE ESTATES VOL. FIRE DEPT.
 3105 SW IVY PL
 RAINBOW LAKES ESTATE FL 34431**

**3105 SW IVY PL.
 RAINBOW LAKES ESTATES FL 34431**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3100614

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CALVERLEY, THOMAS
 20176 SW AUDUBON AVE
 DUNNELLON FL 34431**

Name

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

City

FL

Zip Code

8. 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

Thomas Calverley

1/10/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete
 NAME **CORCORAN, DANIEL P**
 STREET ADDRESS **20394 SW AUDUBON AVE**
 CITY-ST-ZIP **DUNNELLON FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VP** ☐ Delete
 NAME **BARKER, DAVID**
 STREET ADDRESS **BEACH BLVD.**
 CITY-ST-ZIP **RAINBOW LAKES ESTATES FL 34431**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** ☒ Delete
 NAME **KINNEY, CAROLE**
 STREET ADDRESS **1756 ADMIRAL LANDING DR**
 CITY-ST-ZIP **DUNNELLON FL 34431**

TITLE **S** ☒ Change ☐ Addition
 NAME **PAMELA SEYDLO**
 STREET ADDRESS **22997 SW TIGER LAKE BLVD**
 CITY-ST-ZIP **DUNNELLON FL - 34431**

TITLE **T** ☐ Delete
 NAME **CALVERLEY, THOMAS**
 STREET ADDRESS **20176 SW AUDUBON AVE**
 CITY-ST-ZIP **DUNNELLON FL 34431**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☐ Delete
 NAME **LACKET, GARY**
 STREET ADDRESS **1756 ADMIRAL LANDING**
 CITY-ST-ZIP **RAINBOW LAKES ESTATES FL 34461**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **CD** ☐ Delete
 NAME **O'REILLY, FRANCIS**
 STREET ADDRESS **2652 SW VIBURNAM RD**
 CITY-ST-ZIP **DUNNELLON FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Thomas Calverley
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/02
 Date

352 489-8360
 Daytime Phone #

CR2E037 (9/01)