

SECOND STATEMENT OF ANNUAL REPORT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 724226

(6)

1. Corporation Name

LONGBOAT KEY VOLUNTEER FIRE DEPARTMENT, INC

Principal Place of Business

Mailing Address

5490 GULF OF MEXICO DR  
LONGBOAT KEY FL 34228  
US

5490 GULF OF MEXICO DR  
LONGBOAT KEY FL 34228  
US

2. Principal Place of Business  
21 Same as above

2a. Mailing Address  
26 Same as above

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

GEORGE, J. W. (Deceased)  
5112 CORAL BLVD.  
BRADENTON FL 34210

3. Date Incorporated or Qualified

08/29/1972

4. FEI Number

59-1919020

Applied For

Not Applicable

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

10. Name and Address of New Registered Agent

81 Name Leon Feingold  
82 Street Address (P.O. Box Number is Not Acceptable)  
4800 Gulf of Mexico Drive  
83  
84 City Longboat Key FL 85 Zip Code 34228

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

*Leon Feingold*

(NOTE: Registered Agent signature required when reinstating)

10/10/98

DATE

12. OFFICERS AND DIRECTORS

TITLE P ST  
NAME FEINGOLD, LEON  
STREET ADDRESS 4800 GULF OF MEXICO DR.  
CITY-ST-ZIP LONGBOAT KEY FL

TITLE ST  
NAME GEORGE, J. W.  
STREET ADDRESS 5112 CORAL BLVD.  
CITY-ST-ZIP BRADENTON FL

TITLE VP  
NAME WANCA, DANIEL W. D  
STREET ADDRESS 6600 MANATEE AVENUE  
CITY-ST-ZIP BRADENTON FL

TITLE D  
NAME ANNETT, MARGARET  
STREET ADDRESS 597 BAYVIEW DR.  
CITY-ST-ZIP LONGBOAT KEY FL

TITLE D  
NAME GOODRICH, JOHN G. JR.  
STREET ADDRESS 597 BAYVIEW DR.  
CITY-ST-ZIP LONGBOAT KEY FL

TITLE D  
NAME Michael T. Tyrrell  
STREET ADDRESS 2309 Canasta Drive  
CITY-ST-ZIP Bradenton Beach, FL 34217

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

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

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

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

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

6.1 TITLE  
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:

*Leon Feingold* LEON FEINGOLD

9/22/98

(941) 316-1944

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0010457

CR2E037 (5/98)

FILED

98 OCT 20 AM 10:42

SECRETARY OF STATE

