

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 724621

1. Entity Name  
BRADENTON FIREFIGHTERS, INC.



Principal Place of Business

1010 - 9TH AVENUE, WEST  
BRADENTON, FL 34205

Mailing Address

1010 - 9TH AVENUE, WEST  
BRADENTON, FL 34205

**FILED**  
**Aug 20, 2008 08:00 AM**  
**Secretary of State**



07082008 No Chg-NP CR2E037 (4/06)

4. FEI Number 23-7278031	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

TROMPKE, STEVEN M  
1010 9TH AVE WEST  
BRADENTON, FL 34205

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TROMPKE, STEVEN M 16206 GOLF COURSE RD PARRISH, FL 34222
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LANGSTON, KEN 2208 46 ST CIR E BRADENTON, FL 34208
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FINDLAY, RICHARD G 5171 51 LANE W BRADENTON, FL 34210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD NORRIS, GEORGE E 112 A 11TH ST S BRADENTON BEACH, FL 34217
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000958025  
08/20/08-80002-020 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: [Signature]  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/8/2008 941-708-6240  
Date Daytime Phone #