

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 725598 (7)

1. Corporation Name

FORT OGDEN FIRE DEPARTMENT, INC.



Principal Place of Business

Mailing Address

HWY 17 AND MASSACHUTTS
P.O. BOX 151
FORT OGDEN FL 33842

HWY 17 AND MASSACHUTTS
P.O. BOX 151
FORT OGDEN FL 33842

3. Date Incorporated or Qualified
02/19/1973

3a. Date of Last Report
02/13/1995

2. Principal Place of Business

2a. Mailing Address

21 HWY 17 - MASSACHUTTS
Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 P.O. Box 144

27 P.O. Box 144

23 FORT OGDEN, FL.

28 City & State

24 34267

25 Country

29 34267

30 USA

4. FEI Number
NOT APPLICABLE

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHLEISSING, ANDREW H
RR 3 BOX 729
ARCADIA FL 33821

81 Name
DUANE V. SUNNARBORG
82 Street Address (P.O. Box Number is Not Acceptable)
10922 BOGUESS AVE.
83 PO BOX 481
84 City
FORT OGDEN 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 DUANE V. SUNNARBORG
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

7/1/96
DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME SCHLEISSING, ANDREW H
STREET ADDRESS RR 3 BOX 729
CITY - ST - ZIP ARCADIA FL ☒ DELETE

TITLE PD
NAME LANE, ROBERT J.
STREET ADDRESS P. O. BOX 168 SENATE AVE N/A
CITY - ST - ZIP FT. OGDEN FL ☐ DELETE

TITLE D
NAME GIBSON, WALTER
STREET ADDRESS BOX 44 NA, W SENATE AVE
CITY - ST - ZIP FT OGDEN, FLORIDA 0 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CHIEF
1.2 NAME DUANE V. SUNNARBORG
1.3 STREET ADDRESS SENATE ROAD 10922 BOGUESS AVE.
1.4 CITY - ST - ZIP FORT OGDEN, FL. 34267 ☒ Change ☐ Addition

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

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

4.1 TITLE D DAN SHAW
4.2 NAME 11564 S.W. PINE AVE
4.3 STREET ADDRESS ARCADIA, FL. 33821
4.4 CITY - ST - ZIP ☐ Change ☒ Addition

5.1 TITLE D EARLE W. ALLARD
5.2 NAME 11269 S.W. WELCH AVE.
5.3 STREET ADDRESS ARCADIA, FL. 33821
5.4 CITY - ST - ZIP ☐ Change ☒ Addition

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Robert J. Lane
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-25-96 941-444-3799
Date Daytime Phone #