2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726297

FILED Mar 11, 2009 Secretary of State

Entity Name: WILLOW OAK VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business: New Principal Place of Business:

4210 WILLIS RD

MULBERRY, FL 33860 US

Current Mailing Address: New Mailing Address:

P O BOX 381

MULBERRY, FL 33860 US

FEI Number: 59-2364759 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PARKER, BURT F 4320 BAILEY RD

MULBERRY, FL 33860 US

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:

City-St-Zip:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

MULBERRY, FL 33860

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 VD
 () Delete
 Title:
 VD
 (X) Change () Addition

 Name:
 ROLLINS, W T
 Name:
 MEYER, JOSEPH W

 Address:
 2930 BAILEY RD.
 Address:
 5600 STARLING DRIVE

 City, St. 7 in:
 MULL BERRY, EL 23960 LIS

City-St-Zip: MULBERRY, FL City-St-Zip: MULBERRY, FL 33860 US

Title: CPD Title: (X) Change () Addition () Delete PARKER, BURT Name: PARKER, BURT Name: Address: 4320 BAILEY ROAD Address: 4320 BAILEY ROAD City-St-Zip: MULBERRY, FL City-St-Zip: MULBERRY, FL 33860 US

Title: VD () Delete Title: VD (X) Change () Addition Name: HALFORD, LEE Name: FRENCH, WILLIAM

Address: 3945 DAVID DR. Address: 4129 SHADY HAMMOCK DRIVE
City-St-Zip: MULBERRY, FL 33860 US

Title: ST () Delete Title: ST (X) Change () Addition

Name: RODGERS, DAVID F Name: RODGERS, DAVID F Address: 2265 BAILEY ROND Address: 2265 BAILEY ROAD

City-St-Zip: MULBERRY, FL 33860 City-St-Zip: MULBERRY, FL 33860 US

Title: D () Delete Title: () Change () Addition
Name: LA FLAM, THOMAS Name:
Address: 4200 WILLOW OAK DR Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: DAVID F. RODGERS SEC. 03/11/2009