

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 726472

1. Entity Name

LAKE ALFRED FIRE DEPARTMENT BENEVOLENT ASSOCIATI

Principal Place of Business

185 E POMELO ST
LAKE ALFRED FL 33850
US

Mailing Address

185 E POMELO ST
LAKE ALFRED FL 33850
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6000350

Applied For

Not Applicable

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

CRITTENDEN, ROBERT R
103 AVE A N W
WINTER HAVEN FL 33880

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

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 D ☒ Delete
NAME DUNCAN, DARCON
STREET ADDRESS 735 EVOGUST
CITY-ST-ZIP LAKE ALFRED FL 33850

TITLE PRESIDENT ☒ Change ☐ Addition
NAME Jim Brown
STREET ADDRESS 215 N BUENA VISTA
CITY-ST-ZIP LAKE ALFRED, FL 33850

TITLE VP ☒ Delete
NAME BROWN, JIM
STREET ADDRESS 215 N BUENA VISTA
CITY-ST-ZIP LAKE ALFRED FL 33856

TITLE VICE PRESIDENT ☒ Change ☐ Addition
NAME ROGER SMITH
STREET ADDRESS 305 E HOFFMAN ST.
CITY-ST-ZIP LAKE ALFRED, FL 33850

TITLE S ☒ Delete
NAME CORNELL, MIKE
STREET ADDRESS 160 N ROCHELLE AVE
CITY-ST-ZIP LAKE ALFRED FL 33850

TITLE SECRETARY ☒ Change ☐ Addition
NAME CARL BILILEO
STREET ADDRESS 11921 OLD GRADE RD
CITY-ST-ZIP POLK CITY, FL 33868

TITLE D ☐ Delete
NAME CLOUD, LARRY
STREET ADDRESS 355 GOODMAN AVE S
CITY-ST-ZIP LAKE ALFRED FL 33850

TITLE FIRE CHIEF ☐ Change ☐ Addition
NAME LARRY CLOUD
STREET ADDRESS 355 S. GOODMAN AVE
CITY-ST-ZIP LAKE ALFRED, FL 33850

TITLE T ☐ Delete
NAME BEASLEY, BRIAN
STREET ADDRESS 3309 QUEENS COVE LOOP
CITY-ST-ZIP WINTER HAVEN FL 33880

TITLE TREASURER ☐ Change ☐ Addition
NAME BRIAN BEASLEY
STREET ADDRESS 3309 QUEENS COVE LOOP
CITY-ST-ZIP WINTER HAVEN, FL 33880

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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)(i), 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]* REQUIRED

1-8-01 (863) 291-5202

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CR2E037 (10/00)