

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 14, 2003 8:00 am
Secretary of State

01-14-2003 90087 014 ****61.25

DOCUMENT # 726600

1. Entity Name

BAYOU GEORGE VOLUNTEER FIRE DEPARTMENT, INC.



Principal Place of Business

9033 HIGHWAY 2301
YOUNGSTOWN FL 32466
US

Mailing Address

9033 HIGHWAY 2301
YOUNGSTOWN FL 32466
US

2. Principal Place of Business

4033 Hwy 2301 see above

3. Mailing Address

See above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Youngstown Fl.

City & State

See above

Zip

32466

Country

Bay

Zip

see above

Country

see above

4. FEI Number **59-3031340**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUHRKE, LEONHARDT C
7225 CAMPFLOWERS RD
YOUNGSTOWN FL 32466

7. Name and Address of New Registered Agent

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

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **V HARRINGTON, JAMES M JR**
STREET ADDRESS **8638 E BAYHEAD CT**
CITY-ST-ZIP **YOUNGSTOWN FL 32466**

TITLE ☐ Delete
NAME **PD OSMER, WILLIAM E**
STREET ADDRESS **8527 KLONDYKE RD**
CITY-ST-ZIP **YOUNGSTOWN FL**

TITLE ☒ Delete
NAME **S ODUM, MIKE**
STREET ADDRESS **8925 KIWI LANE**
CITY-ST-ZIP **YOUNGSTOWN FL 32466**

TITLE ☐ Delete
NAME **T BUHRKE, CONNIE**
STREET ADDRESS **7225 CAMPFLOWERS ROAD**
CITY-ST-ZIP **YOUNGSTOWN FL**

TITLE ☐ Delete
NAME **BOD BUHRKE, LEONHARDT**
STREET ADDRESS **7225 CAMPFLOWERS**
CITY-ST-ZIP **YOUNGSTOWN FL**

TITLE ☒ Delete
NAME **BOD SCHULTZ, CHARLIE**
STREET ADDRESS **10248 HWY 231**
CITY-ST-ZIP **PANAMA CITY FL 32404**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Board of Director**
STREET ADDRESS **Thomas J Voght**
CITY-ST-ZIP **2216 Sunwood Rd.**
PANAMA CITY FL 32404

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Board of Director**
STREET ADDRESS **Chasity Glass**
CITY-ST-ZIP **6523 Amos Ln.**
YOUNGSTOWN FL 32466

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:

William E Osmer Jr Pres. 525-1956

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)