FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

Change

☐ Change

Addition

Addition

1996

Principal Place of Business

TITLE

NAME

TITLE

NAME

STREET ADORESS

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

COLTSON, DEE

DELAND FL

DELAND FL

31911 SKYLINE DR

VANDERPOOL, MARY

31242 LAKE DRIVE

43927 COOTER POND ROAD

DOCUMENT #
1. Corporation Name 727271

(9)

43927 COOTER POND ROAD

DELETE.

DELETE

Mailing Address

FORREST HILLS VOLUNTARY FIRE DEPARTMENT, INC.

DELAND FL 3	32720	DELAND FL 32720					
					3. Date Incorporated or Qualified 08/28/1973	3a. Date of Last Report 04/24/1995	
	ace of Business	2a. Mailing Address	,	0	4. FEI Number		Applied For
1		26 43606 (0	ore	r Pond	NOT APPLICABLE		Not Applicable
Suite, Apt. #, etc. 43606 Cooler Pond Rd 27 Suite, Apt. #, etc.				•	5. Certificate of Status Desired	1 1	75 Additional e Required
City & State	A	City & State De (and)	F	<u></u>	Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees
zip 30	720 25 115A	29 32720	Count 30 //.	ry <a< td=""><td>This corporation has liability for Florida Statutes</td><td>intangible tax under Yes No</td><td>s. 199.032,</td></a<>	This corporation has liability for Florida Statutes	intangible tax under Yes No	s. 199.032,
1	g. Name and Address of Current	<u> </u>	30 02	· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New I		
	<u> </u>		6	1 Name	10.		
TALLY, LOU				82 Street Address (P.O. Box Number is Not Acceptable)			
822 N. DONNELLY ST.					aress (1.0. Box rearribor is real Acceptain	noj	· · · · · · · · · · · · · · · · · · ·
MT DORA FL 32757				3			
			ē	4 City		FL 85	Zip Code
Pursuant or register	to the provisions of Sections 617.0502 a ed agent, or both, in the State of Florida	and 617.1508, Florida Statutes, Such change was authorized	the above	named corp	oration submits this statement for the purard of directors. Thereby accept the app	pose of changing it ointment as register	s registered offic ed agent. I am
	th, and accept the obligations of, Sectio						
SIGNATURE .	Signature, typed or printed name of registered agent ar	ad Etle if necticable	Downtown A	haut oign thun agus	red when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS 1			ler it signature redu	ADDITIONS/CHANGES TO OFF		TORS IN 12
TITLE	P DELETE		1.1 TITU	· · · · · · · · · · · · · · · · · · ·	7 EEE 110 10 01 11 10 E0 10 01 1	Chang	
NAME	COLTSON, RODNEY	_	1.2 NAM	F			_
STREET ADDRESS	31911 SKYLINE DR		1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	DELAND FL	,	1.4 C/TY	-ST-ZIP			
TITLE	-&	₩ DELETE	2 1 TITLI			☐ Chang	e 🔲 Addition
NAME	ELL; CAROL——	22 N		E !			
STREET ADDRESS	43729 BEAR LAKE BLVD:		2 3 STRE	ET ADDRESS			
CITY-ST-ZIP	DELAND, FL 00000-	/	2 4 CITY	r-ST-ZIP			_
ritle	V	DELETE	3.1 TITLE		Edith Zajac	Chang	e 🗓 Addition
NAME	KIMBALL; PAUL D.		32 NAM	E	Edith Zajac 31742 and Ave		
STREET ADDRESS	31 235 W. LAKESIDE DR IVE		3 3 STRE	ET ADDRESS	31742 2xd Ave	-70 -	
CITY-ST-ZIP			3.4. CITY	(-ST-ZIP	Deland, FL 32	120	
TITLE	TDS	DELETE	4.1 TITLI		7	□ Chang	e Addition
NAME	MARLOW, SUZANNE		4. 2 NAN	1E	unial ander E	had Pd	
STREET ADDRESS	43927 COOTER POND ROAD		4.3 STRE	ET ADDRESS	43606 Cooter F		
CITY-ST-ZIP	DELAND, FL 00000		4.4 C(TY	-ST-ZIP	Deland, FL 33	1720	

51 TITLE

52 NAME

61 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP 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 cath; 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.

5.4 CITY-ST-ZIP