

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 727753

1. Entity Name

BLOOMINGDALE VOLUNTEER FIRE DEPARTMENT, INC.

**FILED**  
**Jan 19, 2001 8:00 am**  
**Secretary of State**

01-19-2001 90012 026 \*\*\*\*61.25

Principal Place of Business

4705 E BLOOMING DALE AVE  
VALRICO FL 33594  
US

Mailing Address

4705 E BLOOMINGDALE AVE  
VALRICO FL 33594  
US

00004340



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1699641

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

LANSKY, GLEN R EQUIRE  
915 OAKFIELD DRIVE  
SUITE F  
BRANDON FL 33511

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PDT  
FRANCIS, MICHAEL J III  
1816 ALCORN ROAD  
VALRICO FL 33594 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VPT  
BROWN, CHARLES  
5401 ROLLING FAIRWAY DRIVE  
VALRICO FL 33594 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
UP  
MILLER RODNEY  
3410 CADE LANE VALRICO FL 33594 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
BARFIELD, JAMES  
2203 DURANT ROAD  
VALRICO FL 33594 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
CURRIE, JAMES A  
1309 IVYWOOD DRIVE  
BRANDON FL 33510 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MILLER, RODNEY  
3410 CADE LANE  
VALRICO FL 33594 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
BROWN CHARLES  
5401 ROLLINGS FAIRWAY DR -  
VALRICO FL 33594 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

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: FRANCIS J. MITCHELL *Francis J. Mitchell* 1/8/01 813-6891124

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)