

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 728052

1. Entity Name

SOUTH CENTRAL FIRE AND RESCUE, INC.

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90155 031 ****61.25

Principal Place of Business

Mailing Address

34335 CHANCEY ROAD
ZEPHYRHILLS FL 33543-5074
US

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ZEPHYRHILLS FL 33543-5074
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2913814

Applied For

Not Applicable

Zip

Country

Zip

Country

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

HOMER, FREED
4523 COATS ROAD
ZEPHYRHILLS FL 33541

Name Ronnie Thrower

Street Address (P.O. Box Number is Not Acceptable)
4708 Fox Ridge Blvd

City Zephyrhills FL 33543

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

Ronnie Thrower

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-18-00

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 TD ☐ Delete
NAME RICKS, BENNETT A
STREET ADDRESS 64024 HWY. 54, W.
CITY-ST-ZIP ZEPHYRHILLS, FL 00000

TITLE ☒ Change ☐ Addition
NAME 37047 Waterside Dr.
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☒ Delete
NAME FREED, HOMER
STREET ADDRESS 4523 COATS ROAD
CITY-ST-ZIP ZEPHYRHILLS, FL 00000

TITLE VD ☐ Change ☒ Addition
NAME DAVID RIPLEY
STREET ADDRESS 4944 S. 6th St
CITY-ST-ZIP Zephyrhills, FL

TITLE SD ☐ Delete
NAME LANE, TERRI
STREET ADDRESS 3624 ASHMORE RD.
CITY-ST-ZIP ZEPHYRHILLS FL

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

TITLE VD ☐ Delete
NAME THROWER, RONNIE
STREET ADDRESS 105 FOXRIDGE BLVD.
CITY-ST-ZIP ZEPHYRHILLS FL

TITLE P/D ☒ Change ☐ Addition
NAME
STREET ADDRESS 4708 Foxridge Blvd
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Deanne R. Ricks Treasurer 4/18/00 813-782-4987

CR2E037 (9/99)