## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#728052** 

FILED Apr 13, 2009 Secretary of State

Entity Name: SOUTH CENTRAL FIRE AND RESCUE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 34335 CHANCEY ROAD ZEPHYRHILLS, FL 335435074 US **Current Mailing Address: New Mailing Address:** 37047 WATERSIDE DR ZEPHYRHILLS, FL 335417556 US FEI Number: 59-2913814 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RICKS, BENNETT 37047 WATERSIDE DR ZEPHYRHILLS, FL 33541 US 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition RIGGS, GAIL Name: Name: 39132 CR 54 Address: Address: City-St-Zip: ZEPHYRHILLS, FL 33540 City-St-Zip: Title: CFOD () Delete Title: () Change () Addition RICKS, BENNETT Name: Name: Address: 37047 WATERSIDE DR. Address: City-St-Zip: ZEPHYRHILLS, FL 33541 City-St-Zip: Title: () Delete Title: () Change () Addition HERNANDEZ, HERMAN Name: Name: 14550 BRUCE B. DOWNS BLVD. Address: Address: City-St-Zip: TAMPA, FL 33613 City-St-Zip: Title: VD Title: () Change () Addition () Delete KASS, JESSE Name: Name: 29925 PRIARIE FALCON DRIVE Address: Address: City-St-Zip: WESLEY CHAPEL, FL 33545 City-St-Zip: Title: () Delete Title: () Change () Addition RAZA, MARK Name: Name: 34335 CHANCEY ROAD Address: Address: City-St-Zip: WESLEY CHAPEL, FL 33545 City-St-Zip: Title: () Delete Title: () Change () Addition PACHECO, NELSON Name: Name: Address: 31826 LARKENHEATH DRIVE Address: WESLEY CHAPEL, FL 33545 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BENNETT RICKS CFOD 04/13/2009