2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 30, 2007 8:00 am Secretary of State

1. Entity Nam	ne	#729362 DLUNTEER FIRE-	RESCUE SQUAD, IN		04-30-2007 9	90865 039 ***	*61.25		
6907 DAIRY ROAD P.O			Mailing Address P.O. BOX 1535 ZEPHYRHILLS, FL 335			60046136			
2. Principal Place of Business - No P.O. Box # 3. Ma			3. Mailing Address	. Mailing Address					
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.		ng-NP C	R2E037 (12/06)		
City & State			City & State	City & State		3	→ → ∴	plied For t Applicable	
Zip		Country	Zip	Country	5. Certificate of St	atus Desired [\$8.75 Add Fee Required		
	6. Name	and Address of Current	Registered Agent		7. Name and Add	7. Name and Address of New Registered Agent			
ATKINS, CHARLES E III 6907 DAIRY RD Name Street Address						ale Barnett (P.O. Box Number is Not Acceptable)			
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ZEPHYRHILLS, FL 33541					4907 Drivy Rel.				
				I City F	cobushil	5	FL Zip Code	ベロ つ	
8. The above	named entit	y submits this statement for	or the purpose of changing its	registered office or regi	stered agent or both, in	the State of Florida	. I am familiar with,	and accept	
the obligat	sions of regist	lered agent.	and title if applicable. (NOTE	Registered Agent signature req	uxed when reinstating)	4/12	6/07 DAFE		
Filing Fee is \$61.25 Due by May 1, 2007				9. Election Campaign Financing Trust Fund Contribution.					
			1	·	\$5.00 May Be Added to Fees		check payable to Department of St		
10.			Trust Fund C	·	Added to Fees	Florida	Department of St	ate	
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	PD PD	flay 1, 2007	Trust Fund C	Contribution.	Added to Fees	Florida	Department of St	ate	
TITLE	PD WINTERS	OFFICERS AND DI	Trust Fund C	11.	Added to Fees	Florida	Department of St	10	
TITLE NAME	PD WINTERS 38022 WII	OFFICERS AND DI	Trust Fund C	11. IITLE NAME	Added to Fees	Florida	Department of St	10	
TITLE NAME STREET ADDRESS	PD WINTERS 38022 WII	OFFICERS AND DI OFFICERS AND DI S, ROBERT G NTER DRIVE	Trust Fund C	11. IIILE NAME STREET ADDRESS	Added to Fees	Florida	Department of St	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WINTERS 38022 WII ZEPHYRI	OFFICERS AND DI OFFICERS AND DI S, ROBERT G NTER DRIVE HILLS, FL 33542	Trust Fund C	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees	Florida	Department of St	ate 10 Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

CITY-ST-ZIP

STREET ADDRESS

CITY-\$1-ZIP

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

CITY - ST - ZIP

THILE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

Daytime Phone #

☐ Change

☐ Addition