

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729362

FILED
Jan 23, 2009
Secretary of State

Entity Name: ZEPHYRHILLS VOLUNTEER FIRE-RESCUE SQUAD, INC.

Current Principal Place of Business:

6907 DAIRY ROAD
ZEPHYRHILLS, FL 33541 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1535
ZEPHYRHILLS, FL 335391535

New Mailing Address:

FEI Number: 59-1842733

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNETT, DALE
6907 DAIRY RD
ZEPHYRHILLS, FL 33542 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: WINTERS, ROBERT G
Address: 38022 WINTER DRIVE
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: VP () Delete
Name: BARNETT, DALE
Address: 6907 DAIRY RD
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: SD () Delete
Name: BARNETT, KEVIN
Address: 6907 DAIRY RD
City-St-Zip: ZEPHYRHILLS, FL 33542

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: DALE BARNETT

VP

01/23/2009

Electronic Signature of Signing Officer or Director

Date