

FILE NOW: FILING FEE IS \$61.25

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Feb 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mertham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **731759** (7)
1. Corporation Name
FLORIDA HIGHLANDS VOLUNTEER FIRE DEPARTMENT, INC



Principal Place of Business 9972 SW 155TH ST DUNNELLO FL 34432 US		Mailing Address 9972 SW 155TH ST DUNNELLO FL 34432 US		3. Date Incorporated or Qualified 01/27/1975
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 03-0001220
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
22 City & State	27 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		
23 Zip	28 Zip	7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
24 Country	29 Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent KLINGEL, KAY 10873 SW 152ND PLACE DUNNELLO FL 34432		10. Name and Address of New Registered Agent	
		81 Name Dorothy Zilberman	
		82 Street Address (P.O. Box Number is Not Acceptable) 11090 SW 150th St.	
		83	
		84 City Dunnellon	85 Zip Code FL 34432

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Dorothy Zilberman DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD BULLIS, EVELYN	1.1 TITLE	PD Stephanie Smith
NAME	10049 SW 155TH ST	1.2 NAME	8392 SW 147th Ave
STREET ADDRESS	DUNNELLO FL	1.3 STREET ADDRESS	Dunnellon FL 34432
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VD POST, FRANK	2.1 TITLE	VD Donald Smith Jr
NAME	9015 SW 155TH ST	2.2 NAME	8392 SW 147th Ave
STREET ADDRESS	DUNNELLO FL	2.3 STREET ADDRESS	Dunnellon FL 34432
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	TD JONES, JANICE M "JAN"	3.1 TITLE	TD Dorothy Zilberman
NAME	10048 SW 155TH ST	3.2 NAME	11090 SW 150th St
STREET ADDRESS	DUNNELLO FL	3.3 STREET ADDRESS	Dunnellon FL 34432
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	SD KLINGEL, KAY	4.1 TITLE	SD Tammy Hunter
NAME	10873 SW 152 PL	4.2 NAME	10025 SW 153th Ave
STREET ADDRESS	DUNNELLO FL	4.3 STREET ADDRESS	Dunnellon FL 34432
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dorothy Zilberman DATE: JAN 5, 98 1-352-237-9422

CR2E037 (10/97)