

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 732539

FILED
Oct 17, 2005
Secretary of State

Entity Name: SANTA ROSA COUNTY FIREFIGHTER'S ASSOCIATION, INC.

Current Principal Place of Business:

4499 PINE FOREST RD
MILTON, FL 325838983

New Principal Place of Business:

4499 PINE FOREST RD
MILTON, FL 32583

Current Mailing Address:

PO BOX 941
MILTON, FL 325838983

New Mailing Address:

PO BOX 941
MILTON, FL 32572

FEI Number: 59-1833817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PFEIFFER, EVERETTE
4499 PINE FOREST ROAD
MILTON, FL 32583 US

Name and Address of New Registered Agent:

PFEIFFER, EVERETT
4499 PINE FOREST ROAD
MILTON, FL 32583 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: EVERETT PFEIFFER

10/17/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: PARKER, LARRY JR
Address: 6162 CARROLL ROAD
City-St-Zip: MILTON, FL 32583

Title: PD () Delete
Name: PFEIFFER, JAMES
Address: 5804 GULF ROAF
City-St-Zip: MILTON, FL

Title: SD () Delete
Name: WADKINS, PAT
Address: 4160 STEPHENS RD
City-St-Zip: PACE, FL

Title: VD () Delete
Name: DIAMOND, MICHELE
Address: 6456 WILMAR DRIVE
City-St-Zip: MILTON, FL

Title: TR () Delete
Name: ROWELL, STEPHEN
Address: 11688 MUNSON HWY
City-St-Zip: MILTON, FL 32570

Title: TR () Delete
Name: LAND, JEFF
Address: PO BOX 791
City-St-Zip: MILTON, FL 32572

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: PFEIFFER, EVERETT
Address: 5804 GULF ROAD
City-St-Zip: MILTON, FL 32583

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

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 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 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: EVERETT PFEIFFER

PD

10/17/2005

Electronic Signature of Signing Officer or Director

Date