

FILE NOW: FILING FEE IS \$61.25

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Mar 12 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mprtham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 732707 (5)

1. Corporation Name
THE OZELLO VOLUNTEER FIRE DEPARTMENT, INC.



Principal Place of Business DEPT 14300 W. OZELLO TRAIL CRYSTAL RIVER FL 34429	Mailing Address DEPT 14300 W. OZELLO TRAIL CRYSTAL RIVER FL 34429
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 05/06/1975	3a. Date of Last Report 05/01/1996
21. Suite, Apt #, etc	26. Suite, Apt #, etc.	4. FEI Number 59-2889102	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	29. Country	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
ELVERS, DOUGLAS 14300 W. OZELLO TRAIL CRYSTAL RIVER FL 34429		81. Name POTTER, STEVE	85. Zip Code 34429
		82. Street Address (P.O. Box Number is Not Acceptable) 14300 W. OZELLO TRAIL	
		83. City	84. State
		CRYSTAL RIVER	FL

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 **Steve Potter** DATE **2-10-1997**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input checked="" type="checkbox"/> DELETE	1.1 TITLE	DR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELVERS, DOUGLAS	1.2 NAME	POTTER, STEVE
STREET ADDRESS	13915 W. OZELLO TRAIL	1.3 STREET ADDRESS	14300 W. OZELLO TRAIL
CITY - ST - ZIP	CRYSTAL RIVER FL 34429	1.4 CITY - ST - ZIP	CRYSTAL RIVER FL 34429
TITLE	T <input type="checkbox"/> DELETE	2.1 TITLE	SI CAPTAIN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	POTTER STEVE	2.2 NAME	PUCKETT, TODD
STREET ADDRESS	14300 W. OZELLO TRAIL	2.3 STREET ADDRESS	14370 W. SHORECLIFF ST
CITY - ST - ZIP	CRYSTAL RIVER FL 34429	2.4 CITY - ST - ZIP	CRYSTAL RIVER FL 34429
TITLE	T <input checked="" type="checkbox"/> DELETE	3.1 TITLE	1ST L <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FALLANCA, CHRIS	3.2 NAME	BROWN, WALTER
STREET ADDRESS	14300 W. OZELLO TRAIL	3.3 STREET ADDRESS	P.O. BOX 280
CITY - ST - ZIP	CRYSTAL RIVER FL 34229	3.4 CITY - ST - ZIP	HOMOSASSA FL 34487
TITLE	T <input type="checkbox"/> DELETE	4.1 TITLE	A.C. <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARPENTER, DANIEL	4.2 NAME	CARPENT, DANIEL
STREET ADDRESS	14518 HIDE-A-WAY DR.	4.3 STREET ADDRESS	14518 HIDE-A-WAY DR.
CITY - ST - ZIP	CRYSTAL RIVER FL	4.4 CITY - ST - ZIP	CRYSTAL RIVER 34429
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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: **Steve Potter** DATE: **2-10-1997**

Daytime Phone # **0079721**

CR2E037 (9/96)