FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 734309 (8)

1. Corporation Name
St, Augustine North Volunteer Fire Department, Inc.
4505 Avenue A
St. Augustine, Florida 32095

Principal Place of Business / Mailing Address
4505 Avenue A
St. Augustine, Florida 32095

3. Date Incorporated or Qualified: 11/13/75
3a. Date of Last Report: 1/24/95

2. Principal Place of Business
21: 4505 Avenue A
22: Suite, Apt. #, etc.
23: City & State: St. Augustine, Fl.
24: Zip: 32095
25: Country: St. Johns

2a. Mailing Address
26: 4505 Avenue A
27: Suite, Apt. #, etc.
28: City & State: St. Augustine, Fl.
29: Zip: 32095
30: Country: St. Johns

4. FEI Number: 59-1694336 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
Cumbie, Rhonda
4540 Third Ave.
St. Augustine, Fl. 32095

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 000001875020 -06/26/96--01032--013
84 City ***61.25 FL 85 Zip Code

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: Rhonda Cumbie — 6-18-96
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Roy J. Dorsett, Jr. 231 Indian Bend Rd. St. Augustine, Fl. 32095	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	Vice-President Chance Hines 2665 Pellicer Rd. St. Augustine, Fl. 32095	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice - President Jim Catlett 7050 Catlett Rd. St. Augustine, Fl. 32095	☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	Secretary Leslie Hines 2665 Pellicer Rd. St. Augustine, Fl. 32095	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Rhonda Cumbie 45[illegible] Third St. St. Augustine, Fl. [illegible]	☒ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	Director Stephen Gibson 409 Belmonte Ave. St. Augustine, Fl. 32095	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Roy J. Dorsett, Jr. 231 Indian Bend Rd. St. Augustine, Fl. [illegible]	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	Director Todd Lowell 1005 [illegible] St. Augustine, Fl. 32095	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director [illegible] 643 Queen Rd. St. Augustine, Fl. 32086	☒ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	Director [illegible] 1007 S. Ponce DeLeon #114 St. Augustine, Fl. 32095	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Verlie Dorsett 231 Indian Bend Rd. St. Augustine, Fl. 32095	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	St. Augustine, Fl. 32095 Marc Grabert 4761 Ave. B St. Augustine, Fl. 32095	☐ Change ☒ Addition

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Roy J Dorsett — May 7, 1996 — 904-824-4834
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

Roy J. Dorsett, Jr. President