

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735291

FILED  
Jan 25, 2012  
Secretary of State

**Entity Name:** ALLENTOWN VOLUNTEER FIRE DEPARTMENT, INC.

**Current Principal Place of Business:**

9482 HWY 89  
JAY, FL 32565 US

**New Principal Place of Business:**

**Current Mailing Address:**

9482 HWY 89  
JAY, FL 325659482 US

**New Mailing Address:**

9482 HWY 89  
JAY, FL 32565 US

**FEI Number:** 59-2429228

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WARD, STEPHEN  
5520 LAMAR WARD LANE  
MILTON, FL 32570 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: CM  
Name: WARD, STEPHEN L  
Address: 5520 LAMAR WARD LANE  
City-St-Zip: MILTON, FL

Title: D  
Name: JOHNSON, CAROYLN  
Address: 5350 HIGHWAY 178  
City-St-Zip: MILTON, FL 32570

Title: V  
Name: KIMBRELL, JASON  
Address: 2701 SEGREST RD  
City-St-Zip: PACE, FL 32571

Title: T  
Name: WARD, DEAN  
Address: 7835 CHETWOOD DR  
City-St-Zip: MILTON, FL 32570

Title: D  
Name: ELLISON, BEN  
Address: 4032 DALLAS ELLIOT RD.  
City-St-Zip: JAY, FL 32565

Title: D  
Name: HALE, TIM  
Address: 4880 HORRACE LUNSFORD RD.  
City-St-Zip: MILTON, FL 32570

I hereby 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 all other like empowered.

SIGNATURE: STEPHEN WARD

P

01/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date