

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 736889

**FILED**  
**Jul 13, 2004**  
**Secretary of State****Entity Name:** MYRTLE GROVE VOLUNTEER FIRE DEPARTMENT, INC.**Current Principal Place of Business:**7209 W LILLIAN HWY  
PO BOX 3622  
PENSACOLA, FL 32516**New Principal Place of Business:****Current Mailing Address:**7209 W LILLIAN HWY  
PO BOX 3622  
PENSACOLA, FL 32516**New Mailing Address:****FEI Number:** 59-2387274      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**GUTTMANN, MICHAEL L  
314 S. BAYLEN ST., 201  
PENSACOLA, FL 32501      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:** D      ( ) Delete  
**Name:** BANKS, GERGEL  
**Address:** 7209 LILLIAN HWY  
**City-St-Zip:** PENSACOLA, FL 32506**Title:** D      ( ) Delete  
**Name:** KING, SEAN  
**Address:** 7209 LILLIAN HWY  
**City-St-Zip:** PENSACOLA, FL 32506**Title:** DS      ( ) Delete  
**Name:** HANKS, DAVID  
**Address:** 7209 LILLIAN HWY  
**City-St-Zip:** PENSACOLA, FL 32506**Title:** PD      ( ) Delete  
**Name:** WEAVER, MARY  
**Address:** 7209 LILLIAN HWY  
**City-St-Zip:** PENSACOLA, FL 32506**Title:** T      ( ) Delete  
**Name:** JORDAN, ROBERT  
**Address:** 7209 LILLIAN HWY  
**City-St-Zip:** PENSACOLA, FL 32506**Title:** VP      ( ) Delete  
**Name:** RUMMAGE, AARON  
**Address:** 7209 LILLIAN HWY  
**City-St-Zip:** PENSACOLA, FL 32506**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** VP      (X) Change ( ) Addition  
**Name:** BANKS, GERMEL  
**Address:** 7209 LILLIAN HWY  
**City-St-Zip:** PENSACOLA, FL 32506**Title:** D      (X) Change ( ) Addition  
**Name:** BAKER, JASON  
**Address:** 7209 LILLIAN HWY  
**City-St-Zip:** PENSACOLA, FL 32506**Title:** DS      (X) Change ( ) Addition  
**Name:** SHORE, BRYAN  
**Address:** 7209 LILLIAN HWY  
**City-St-Zip:** PENSACOLA, FL 32506**Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** T      (X) Change ( ) Addition  
**Name:** DUMAS, DANNY  
**Address:** 7209 LILLIAN HWY  
**City-St-Zip:** PENSACOLA, FL 32506**Title:** D      (X) Change ( ) Addition  
**Name:** PRINCE, ROBBIE  
**Address:** 7209 LILLIAN HWY  
**City-St-Zip:** PENSACOLA, FL 32506

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: MARY WEAVER

PD

07/13/2004

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