

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 31, 2002 8:00 am
Secretary of State

03-31-2002 90346 034 ****61.25

DOCUMENT # **736996**

1. Entity Name

DEER RUN VOLUNTEER FIRE DEPARTMENT, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4700 DEER RUN RD

Suite, Apt. #, etc.

3. Mailing Address

4700 DEER RUN RD

Suite, Apt. #, etc.

City & State

ST CLOUD, FL

City & State

ST CLOUD, FL

4. FEI Number

59-6000780

Applied For

Not Applicable

Zip Country

34772

USA

Zip Country

34772

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

RON COOKE

Street Address (P.O. Box Number is Not Acceptable)

3981 HICKERY TREE RD

City

ST CLOUD

FL

Zip Code

34772

**DO NOT WRITE
IN THIS SPACE**

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FEE IS \$61.25
Initial or Amended UBR**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
STONE, FRANCES
3800 RAMBLER AVE
ST CLOUD, FL 34772

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
CAROL WHITFIELD
3799 RAMBLER AVE
ST CLOUD, FL 34772

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
ROY WHITFIELD
3799 RAMBLER AVE
ST CLOUD, FL 34772

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
LINDSY HAYS
1377PATRICIA ST
KISSIMMEE, FL 34744

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. I 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 report or supplemental 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Carol Whitfield* CAROL WHITFIELD

3-18.02

407-957-1611

CR2E037B (12/01)