

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 738191

1. Corporation Name
Glendale Volunteer Fire Department, Inc.

Principal Place of Business
148 Railroad Ave.
DeFuniak Springs, FL 32433
US

Mailing Address
148 Railroad Ave.
DeFuniak Springs, FL 32433
US

2. Principal Place of Business

21 Suite, Apt #, etc.
22 City & State
23 Zip Country
24

2a. Mailing Address

26 Suite, Apt #, etc.
27 City & State
28 Zip Country
29

9. Name and Address of Current Registered Agent

Kinkey, Arthur
10079 State Hwy 83 North
DeFuniak Springs, FL 32433

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

3. Date Incorporated or Qualified

02/22/1977

4. FEI Number
Not Applicable

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

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent available if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS		
TITLE	D Maxson, David L.	<input checked="" type="checkbox"/> DELETE
NAME	269 Hallalujah Trail	
STREET ADDRESS	DeFuniak Springs, FL 32433	
CITY-ST-ZIP		
TITLE	D Kinkey, Arthur	<input type="checkbox"/> DELETE
NAME	10079 State Rd. 83	
STREET ADDRESS	DeFuniak Springs, FL 32433	
CITY-ST-ZIP		
TITLE	D Laird, Lennie	<input type="checkbox"/> DELETE
NAME	125 Sullivan St.	
STREET ADDRESS	DeFuniak Springs, FL 32433	
CITY-ST-ZIP		
TITLE	D Murphy, Joey	<input type="checkbox"/> DELETE
NAME	13 Sullivan St.	
STREET ADDRESS	DeFuniak Springs, FL 32433	
CITY-ST-ZIP		
TITLE	D Bell, Kevin	<input type="checkbox"/> DELETE
NAME	921 St. Hwy. 42 West	
STREET ADDRESS	DeFuniak Springs, FL 32433	
CITY-ST-ZIP		
TITLE	DS Maxson, Tracy L.	<input checked="" type="checkbox"/> DELETE
NAME	269 Hallalujah Trail	
STREET ADDRESS	DeFuniak Springs, FL 32433	
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
11 TITLE	D Wilkerson, John	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	297 Railroad Ave.	
13 STREET ADDRESS	DeFuniak Springs, FL 32433	
14 CITY-ST-ZIP		
21 TITLE	D Hall, Luke	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	3670 County Hwy 1084	
23 STREET ADDRESS	DeFuniak Springs, FL 32433	
24 CITY-ST-ZIP		
31 TITLE	DT Dell, Kevin M.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	230 Bluebird Lane	
33 STREET ADDRESS	DeFuniak Springs, FL 32433	
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

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*****61.25 [Change] *****61.25

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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, with all other like empowered.

SIGNATURE: Kevin M Dell Kevin M Dell 3-6-1999 (850) 859-0180
Date: Daytime Phone #

CR2E037 (11/98)