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 24 Country 25

2a. Mailing Address
26
Suite, Apt #, etc.
27
City & State
28
Zip 29 Country 30

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

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City 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
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when remaining) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	[X] DELETE
NAME	Maxson, David L.	
STREET ADDRESS	269 Hallalujah Trail	
CITY-ST-ZIP	DeFuniak Springs, FL 32433	
TITLE	D	[ ] DELETE
NAME	Kinkey, Arthur	
STREET ADDRESS	10079 State Rd. 83	
CITY-ST-ZIP	DeFuniak Springs, FL 32433	
TITLE	D	[ ] DELETE
NAME	Laird, Lennie	
STREET ADDRESS	125 Sullivon St.	
CITY-ST-ZIP	DeFuniak Springs, FL 32433	
TITLE	D	[ ] DELETE
NAME	Murphy, Joey	
STREET ADDRESS	13 Sullivon St.	
CITY-ST-ZIP	DeFuniak Springs, FL 32433	
TITLE	T	[ ] DELETE
NAME	Dell, Kevin	
STREET ADDRESS	921 St. Hwy. 42 West	
CITY-ST-ZIP	DeFuniak Springs, FL 32433	
TITLE	DS	[X] DELETE
NAME	Maxson, Tracy L.	
STREET ADDRESS	269 Hallaluja Trail	
CITY-ST-ZIP	DeFuniak Springs, FL 32433	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	D	[ ] Change [X] Addition
12 NAME	Wilkerson, John	
13 STREET ADDRESS	297 Railroad Ave.	
14 CITY-ST-ZIP	DeFuniak Springs, FL 32433	
21 TITLE	D	[ ] Change [X] Addition
22 NAME	Hall, Luke	
23 STREET ADDRESS	3670 County Hwy 1084	
24 CITY-ST-ZIP	DeFuniak Springs, FL 32433	
31 TITLE	DT	[X] Change [ ] Addition
32 NAME	Dell, Kevin M.	
33 STREET ADDRESS	230 Bluebird Lane	
34 CITY-ST-ZIP	DeFuniak Springs, FL 32433	
41 TITLE		[ ] Change [ ] Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		[ ] Change [ ] Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		[ ] Change [ ] Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

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DS 5-20-99

14. 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 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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)