

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 739364

**FILED**  
**Jan 04, 2010**  
**Secretary of State**

**Entity Name:** PALM CITY VOLUNTEER FIREMAN'S ASSOCIATION, INC.

**Current Principal Place of Business:**

3290 SW MAPP RD  
PALM CITY, FL 34990

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1005  
PALM CITY, FL 34991 US

**New Mailing Address:**

**FEI Number:** 59-1763744

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RANSON, WILLIAM  
5927 SE RIVERBOAT DR  
STUART, FL 34997 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: PT  
Name: RANSON, WILLIAM  
Address: 5927 SE RIVERBOAT DR  
City-St-Zip: STUART, FL 34997

Title: S  
Name: SHELT, ROB  
Address: 2441 SW REGENCY RD  
City-St-Zip: STUART, FL 34997

Title: D  
Name: GOETHEL, DOUG  
Address: 8166 SW YACHTSMANS DR  
City-St-Zip: STUART, FL 34997

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: WILLIAM R RANSON

PT

01/04/2010

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

\_\_\_\_\_  
Date