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Apr 02 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 740717 (4)

1. Corporation Name

SOUTH PASADENA VOLUNTEER FIRE DEPARTMENT, INC.



Principal Place of Business

Mailing Address

911 OLEANDER WAY SOUTH  
SOUTH PASADENA FL 33707

911 OLEANDER WAY SOUTH  
SOUTH PASADENA FL 33707-2150

3. Date Incorporated or Qualified  
11/07/1977

3a. Date of Last Report  
05/23/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number

59-2543496

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

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HOLLENBACK, KRIS  
2763 W. VINA DEL MAR  
ST PETERSBURG BEACH FL 33706

81 Name Kris Hollenback

82 Street Address (P.O. Box Number is Not Acceptable)  
2763 W. Vina Del Mar

83

84 City St. Pete Beach

FL

85 Zip Code 33706

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 reinstating)

DATE

3/28/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME HOLLENBACK, KRIS  
STREET ADDRESS 2763 W. VINA DEL MAR  
CITY-ST-ZIP ST. PETERSBURG BEACH FL 33706 ☐ DELETE

TITLE V/T  
NAME MANTAY, JASON  
STREET ADDRESS 128 11TH ST. E.  
CITY-ST-ZIP TIERRA VERDE FL 33715 ☐ DELETE

TITLE S/D  
NAME MCDOW, GARY  
STREET ADDRESS 5875 BONNIE BAY CIR. N.  
CITY-ST-ZIP PINELLAS PARK FL 33665 ☐ DELETE

TITLE TR/D  
NAME SPRUILL, ROY  
STREET ADDRESS 8888 56 ST. N.  
CITY-ST-ZIP PINELLAS PARK FL 34666 ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 officer 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.

SIGNATURE

Signature required

3/28/97 (813)

CR2E037 (9/96)