2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2009
Secretary of State

DOCUMENT# 741219

Entity Name: MEDULLA VOLUNTEER FIREFIGHTERS ASSOCIATION, INC.

Current Principal Place of Business:

5115 OLD HWY 37
LAKELAND, FL 338112330

New Principal Place of Business:

Current Mailing Address:

5321 LISA AVE
LAKELAND, FL 338112330

New Mailing Address:

FEI Number: 57-1221238 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MYERS, THOMAS A
5321 LISA AVE
LAKELAND, FL 33813 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: D ( ) Delete
Name: GEORGE, JAMES
Address: 4605 SOUTH PIPKIN RD
City-St-Zip: LAKELAND, FL 33811

Title: STD ( ) Delete
Name: MYERS, THOMAS
Address: 5321 LISA AVE
City-St-Zip: LAKELAND, FL 33813

Title: DC ( ) Delete
Name: PERKINS, TERRY
Address: 3525 PINEDALE DR
City-St-Zip: LAKELAND, FL 33811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: THOMAS MYERS STD 04/12/2009

Electronic Signature of Signing Officer or Director — Date