

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 741844**

1. Entity Name

GRAY GABLE, NASSAU VILLAGE VOLUNTEER FIRE DEPART**FILED**
Mar 16, 2001 8:00 am
Secretary of State

03-16-2001 90050 050 ****70.00

0006233

Principal Place of Business

2909 LEM TURNER RD
PO BOX 831
CALLAHAN FL 32011

Mailing Address

PO BOX 831
CALLAHAN FL 32011

902001



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

P.O. Box 1038

Suite, Apt. #, etc.

Callahan, FL

City & State

Zip

Country

32011

USA

4. FEI Number

59-2060054

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional**
Fee Required

6. Name and Address of Current Registered Agent

TAYLOR, ROBERT W. JR.
COUNTRY CLUB RD., LOT #9 NASSAU VILLAGE
CALLAHAN FL 32011

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEES ARE \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be**
Added to Fees**Make Check Payable to**
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ROBERTS, JAMES
STREET ADDRESS 2536 SHEFFIELD RD
CITY-ST-ZIP CALLAHAN FL ☒ DeleteTITLE T
NAME COLTRANE, CATHY
STREET ADDRESS 4161 CHURCH RD
CITY-ST-ZIP CALLAHAN FL ☐ DeleteTITLE S
NAME DEBRA M HORTON
STREET ADDRESS 2720 SHEFFIELD RD
CITY-ST-ZIP CALLAHAN FL ☐ DeleteTITLE VD
NAME DEMICK, RICHARD
STREET ADDRESS 4455 CHURCH RD
CITY-ST-ZIP CALLAHAN FL ☐ DeleteTITLE D
NAME CONLEY, GARY
STREET ADDRESS 3393 ARMSTRONG ST
CITY-ST-ZIP CALLAHAN FL ☐ DeleteTITLE CD
NAME COLTRANE, REVIS
STREET ADDRESS 4161 CHURCH RD
CITY-ST-ZIP CALLAHAN FL ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME Jennifer Rawls
STREET ADDRESS 3271 Sunshine DR
CITY-ST-ZIP Callahan, FL 32011 ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBRA M. HORTON

REVIS COLTRANE

3/13/01

904-878-1924

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)