

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 741846 (0)

1. Corporation Name

MARION OAKS FIRE DEPARTMENT, INC.

Principal Place of Business

102 MARION OAKS LANE
OCALA FL 34473

Mailing Address

102 MARION OAKS LANE
OCALA FL 34473



300001868903

-06/20/96--01022--009

***61.25

3. Date Incorporated or Qualified
02/28/1978

3a. Date of Last Report
02/22/1995

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

4. FEI Number

59-1809597

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

RODRIGUEZ, SAUL
2497 S.W. 156TH LANE ROAD
OCALA FL 34473

81 Name Vincent C. Briganti

82 Street Address (P.O. Box Number is Not Acceptable)
15217 SW 46 Cir.

83

84 City Ocala

FL

85 Zip Code 34473

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 officer 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 617.033, Florida Statutes.

SIGNATURE

Vincent C. Briganti DC

(NOTE: Registered Agent signature required when reinstating)

DATE

5/17/96

12. OFFICERS AND DIRECTORS

TITLE DC ☒ DELETE

NAME RODRIGUEZ, SAUL
STREET ADDRESS 2497 S.W. 156TH LANE ROAD
CITY-ST-ZIP Ocala FL

TITLE PD ☒ DELETE

NAME PASQUEZ, MANUEL S.
STREET ADDRESS 3544 SW 147 LANE ROAD
CITY-ST-ZIP Ocala FL

TITLE VPD ☒ DELETE

NAME MOFFITT, ROBERT
STREET ADDRESS 11160 SW 27 AVE
CITY-ST-ZIP Ocala FL

TITLE S ☒ DELETE

NAME TEETSELL, FRED
STREET ADDRESS 14570 SW 41 TERR
CITY-ST-ZIP Ocala FL

TITLE AC ☐ DELETE

NAME BRIGANTI, VINCENT C
STREET ADDRESS 15020 SW 48TH CT
CITY-ST-ZIP Ocala FL

TITLE D ☐ DELETE

NAME HASSARO, DONNA J.
STREET ADDRESS 14230 SW 33 CT RD
CITY-ST-ZIP Ocala FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D.C. Vincent C. Briganti ☒ Change ☐ Addition

1.2 NAME Vincent C. Briganti
1.3 STREET ADDRESS 15217 SW 46 Cir.
1.4 CITY-ST-ZIP Ocala, FL 34473

2.1 TITLE P.D. ☐ Change ☒ Addition

2.2 NAME Charles Greer
2.3 STREET ADDRESS 2530 SW 155 St
2.4 CITY-ST-ZIP Dunnellon FL 34432

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME Samuel A. Martian
3.3 STREET ADDRESS 11160 S.W. 27th Ave
3.4 CITY-ST-ZIP Ocala FL 34476

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME Joseph Mera
4.3 STREET ADDRESS 3398 SW 147 St.
4.4 CITY-ST-ZIP Ocala FL 34473

5.1 TITLE D ☒ Change ☐ Addition

5.2 NAME Donna Falco
5.3 STREET ADDRESS 14230 SW 33 CT RD
5.4 CITY-ST-ZIP Ocala FL 34473

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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05-01-96 OR

23 Feb 96 352-347-0724

CR2E037 (12/95)