2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Apr 19, 2005 08:00 AM Secretary of State **DOCUMENT # 741935** DESOTO CITY VOLUNTEER FIRE DEPARTMENT, INC. Principal Place of Business Mailing Address P O BOX 653 6800 GEORGE BLVD WEST SEBRING, FL 33875 SEBRING, FL 33871-0653 03132005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1838485 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE HENRY, CLIFFORO 316 LOTUS AVE SEBRING, FL 33872 IN THIS SPACE . 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. I am familiar with, and accept the obligations of registered agent. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing Filing Fee is \$61.25 Due by May 1, 2005 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE PD NAME HENRY, CLIFFORD STREET ADDRESS 316 LOTUS AVE CITY-ST-ZIP SEBRING, FL 33872 TITLE U00000315580 04/19/05-80041-015 61.25 NAME DEBREE, JENNIFER STREET ADDRESS 4635 QUEEN PALM DR CITY-ST-ZIP SEBRING, FL 33872 TILE NAME STEWART, SUSAN STREET ADDRESS 6815 LAKESIDE DR W DO NOT WRITE CITY-SI-ZIP SEBRING, FL 33875 IN THIS SPACE TITLE NAME DEBREE, JOE JR. STREET ADDRESS 4720 HOWARD ST CITY-ST-7IP SEBRING, FL 33870 TITLE NAME LEIGHT, MICHELLE STREET ADDRESS PO BOX 8073 CITY-\$1-21P SEBRING, FL 33871 TILE NAME

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 afternment with an address, with all other like empowered.

SIGNATURE: SUMSTRUCCI SUSANSTRUCCIT

STREET ADDRESS

405 8124CD-LAST

FILED