

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 744552 (1)

1. Corporation Name

ELECTRA VOLUNTEER FIRE DEPARTMENT, INC.



Principal Place of Business

Mailing Address

5420 SE 180TH AVENUE RD.
OKLAWAHA FL 32179

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OKLAWAHA FL 32179

3. Date Incorporated or Qualified
10/12/1978

3a. Date of Last Report
07/25/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2635563

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MCCANN, KENNETH C
3023 NE 147TH TERR
SILVER SPRINGS FL 34488**

81 Name

Skelly, Helen T

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

6670 S.E. 171. ST CT.

83

84 City

Ocklawaha,

FL

85 Zip Code
32179

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

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

Helen T. Skelly President

1-31-96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** DELETE
NAME **MCCANN, KENNETH C**
STREET ADDRESS **3023 147TH TERR**
CITY - ST - ZIP **SILVER SPRINGS FL**

1.1 TITLE **Vice-President** Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **VP** DELETE
NAME **SKELLY, HELEN**
STREET ADDRESS **6670 SE 171 CT**
CITY - ST - ZIP **OKLAWAHA FL**

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

TITLE **T** DELETE
NAME **PAYETTE, DONNA**
STREET ADDRESS **2424 NE 145TH AVE RD**
CITY - ST - ZIP **SILVER SPRINGS FL**

3.1 TITLE **Director** Change Addition
3.2 NAME
3.3 STREET ADDRESS **400001729194**
3.4 CITY - ST - ZIP **-03/01/96--01040--018**
*****61.25**

TITLE **D** DELETE
NAME **RATHMAN, ARTHUR**
STREET ADDRESS **1179 SE 159 TERR**
CITY - ST - ZIP **SILVER SPRINGS FL**

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

TITLE **S** DELETE
NAME **MCCANN, TAMMY L**
STREET ADDRESS **3023 NE 147TH TERR**
CITY - ST - ZIP **SILVER SPRINGS FL**

5.1 TITLE **Secretary** Change Addition
5.2 NAME
5.3 STREET ADDRESS **Kimberly Bayne**
5.4 CITY - ST - ZIP **6698 SE 171 Ct.**

TITLE **D** DELETE
NAME **BARMORE, CHERI**
STREET ADDRESS **RT. 3 BOX 808**
CITY - ST - ZIP **OKLAWAHA FL**

6.1 TITLE **Treas.** Change Addition
6.2 NAME
6.3 STREET ADDRESS **James Henderson**
6.4 CITY - ST - ZIP **19070 SE 96 St. Ocklawaha, FL 32179**

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: *Helen T. Skelly* **Helen T. Skelly President 1-31-96**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(352)625-4287

Daytime Phone #

CR2E037 (12/95)