## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 744552** 

Apr 17, 2004 Secretary of State

Entity Name: ELECTRA VOLUNTEER FIRE DEPARTMENT, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

5420 SE 180TH AVENUE RD. OKLAWAHA, FL 32179

**Current Mailing Address: New Mailing Address:** 

5420 SE 180TH AVENUE RD. OKLAWAHA, FL 32179

FEI Number: 59-2635563 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BERKOWITZ, ALLEN 18349 SE 54TH PL OCKLAWAHA, FL 32179 US

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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

SEC. () Delete (X) Change ( ) Addition EATON, BRUCE GINGRAS, CAROLE Name: Name:

2065 SE 181 ST TER. Address: 18349 SE 54TH PL Address: City-St-Zip: SILVER SPRINGS, FL 34488 City-St-Zip: OCKLAWAHA, FL 32179

Title: TREA Title: () Change () Addition ( ) Delete

BEHR, DAN Name: Name: Address: 5871 SE 171 CT Address: City-St-Zip: OCKLAWAHA, FL 32179 City-St-Zip:

Title: DIR. () Delete Title: DIR. (X) Change ( ) Addition

SKELLY, HELEN DAY, TRACY Name: Name: 6670 SE 171ST CT Address: Address: 18401 SE 54TH PL City-St-Zip: OCKLAWAHA, FL 32179 City-St-Zip: OCKLAWAHA, FL 32179

Title: V. P ( ) Delete Title: () Change () Addition

Name: PAYETTE, DONNA Name: Address: 5550 SE 180TH AVE RD. Address: City-St-Zip: OCKLAWAHA, FL 32179 City-St-Zip:

Title: **PRES** ( ) Delete Title: () Change () Addition

BERKOWITZ, ALLEN Name: Name: 18349 SE 54TH PL Address: Address: City-St-Zip: OCKLAWAHA, FL 32179 City-St-Zip:

Title: () Delete Title: () Change () Addition

SKELLY, RICK Name: Name: Address: 6670 SE 171ST CT Address: OCKLAWAHA, FL 32179 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALLEN BERKOWITZ **PRES** 04/17/2004