

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747414

FILED
May 13, 2004
Secretary of State**Entity Name:** LLOYD VOLUNTEER FIRE RESCUE DEPARTMENT, INC.**Current Principal Place of Business:**COUNTY ROAD 158, JENCTION 59
P. O. BOX 201
LLOYD, FL 32337**New Principal Place of Business:**COUNTY ROAD 158, JUNCTION 59
P. O. BOX 201
LLOYD, FL 32337**Current Mailing Address:**COUNTY ROAD 158, JENCTION 59
P. O. BOX 201
LLOYD, FL 32337**New Mailing Address:**COUNTY ROAD 158, JUNCTION 59
P. O. BOX 201
LLOYD, FL 32337**FEI Number:** 59-2020189**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WEINRICH, JERRY
4503 LLOYD ACRES ROAD
P O BOX 421 N/A
LLOYD, FL 32337 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date _____

OFFICERS AND DIRECTORS:**Title:** D () Delete
Name: WEINRICH, JERRY
Address: PO BOX 421 N/A
City-St-Zip: LLOYD, FL**Title:** FCD () Delete
Name: SCHAUBEL, WILLIAM
Address: PO BOX 176
City-St-Zip: LLOYD, FL 32337**Title:** TD () Delete
Name: MCCORD, MILLIAN
Address: 250 MORNING SHADOW LANE
City-St-Zip: MONTICELLO, FL 32344**Title:** S () Delete
Name: DUPUIS, JACQUELYN
Address: RT. 5, BOX 5452
City-St-Zip: MONTICELLO, FL 32344**Title:** P () Delete
Name: EDWARD, WALTER
Address: P.O. BOX 8
City-St-Zip: LLOYD, FL 32337**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: SCHAUBEL, WILLIAM
Address: PO BOX 176
City-St-Zip: LLOYD, FL 32337**Title:** TD (X) Change () Addition
Name: MCCORD, MILLARD
Address: 250 MORNING SHADOW LANE
City-St-Zip: MONTICELLO, FL 32344**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** FC () Change (X) Addition
Name: HUNT, TERRY
Address: 179 HUNT LANE
City-St-Zip: MONTICELLO, FL 32344

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: MILLARD MCCORD

TD

05/13/2004

Electronic Signature of Signing Officer or Director

Date