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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **750285**

1. Corporation Name

BRADEN RIVER VOLUNTEER FIRE DEPARTMENT & RESCUE SQUAD, INC.

333965 - 90002 - 49

Principal Place of Business	Mailing Address
803 60TH STREET CT EAST BRADENTON FL 34208	8800 S.R. 70 EAST BRADENTON FL 34208 US

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 12/19/1979	
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2752010	☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

AMMERAAL, RAY
8011 BROWER DR. E.
BRADENTON FL 34202

10. Name and Address of New Registered Agent

81 Name: KALMBACH, BRIAN
82 Street Address (P.O. Box Number is Not Acceptable): 2404 B 51 AVE TERR W
83
84 City: BRADENTON, FL FL 85 Zip Code: 34207

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 _____ DATE 3-3-99
Signature, typed or printed name of Registered Agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD AMMERAAL, RAY 8011 BROWER, DR. E. BRADENTON FL 34202	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD PRESIDENT KALMBACH, BRIAN 2404 B 51 AVE TERR W BRADENTON, FL 34207	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD FINDLAY, RICK 6504 OAK HAMMOCK DRIVE BRADENTON FL 34202	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VP RANCK BETH 11420 PARKSIDE PL BRADENTON, FL 34202	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DUNKUM, RICHARD B 2901 MOCCOSIN WALLAU ROAD PALMETTO FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD DUNKUM, DAWN 2901 MOCCASIN WALLOW RD PALMETTO FL 34221	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	SD HARTSFIELD, RANDI 22123 26 AVE E BRADENTON, FL 34202	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (11/98)

14. 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 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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 3.3.99 941 751-5611
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #