2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#750740

FILED Feb 01, 2005 Secretary of State

Entity Name: HEILBRONN SPRINGS VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business: New Principal Place of Business: HWY 16 @ INTERSECTION CR 229A STARKE, FL 32091 **Current Mailing Address: New Mailing Address:** 21412 NW STATE RD. 16 LAWTEY, FL 32091 FEI Number: 59-2876888 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCCARTHY, TERRY A 6416 CR 229 A STARKE, FL 32091 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MCCARTHY, TERRY A Name: Name: 6416 CR 229 A Address: Address: City-St-Zip: STARKE, FL 32091 City-St-Zip: Title: TD () Delete Title: (X) Change () Addition Name: BENCKOWSKY, STANLEY Name: WILLIAMSON, ANN B Address: CR 225 Address: 6416 NW CR 229 A City-St-Zip: STARKE, FL 32091 City-St-Zip: STARKE, FL 32091 Title: () Delete Title: () Change () Addition GARBER, GLEN JR. Name: Name: NW 220TH WAY Address: Address: City-St-Zip: STARKE, FL 32091 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: SHACKLEY, SAMMY Name: CLEMONS, MATT Address: 318 S. REGRAVE ST. Address: NW CR 229 A City-St-Zip: STARKE, FL 32091 City-St-Zip: STARKE, FL 32091 Title: () Delete Title: () Change () Addition OLIVE, LONNIE JR Name: Name: 514 E. NORA ST. Address: Address: City-St-Zip: STARKE, FL 32091 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: TERRY A. MCCARTHY CD 02/01/2005