

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 750998

**FILED**  
**Mar 15, 2011**  
**Secretary of State**

**Entity Name:** PINETTA VOLUNTEER FIRE AND RESCUE, INC.

**Current Principal Place of Business:**

509 NE PERSIMMON DR.  
PINETTA, FL 32350 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 35  
PINETTA, FL 32350 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

REEVES, GEORGE T  
901 WEST BASE  
MADISON, FL 32340 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: PD  
Name: FINNEY, DOUG  
Address: 203 NE JOAN AVE  
City-St-Zip: MADISON, FL 32340

Title: VP  
Name: SHEWCHUK, WAYNE  
Address: 438 NE ENGLISH IVY TR.  
City-St-Zip: PINETTA, FL 32350

Title: S  
Name: SPIRES, VICTORIA  
Address: P.O. BOX 53  
City-St-Zip: PINETTA, FL 32350

Title: T  
Name: SHADRICK, ALLEN  
Address: 10129 NW COLON KELLY HWY  
City-St-Zip: PINETTA, FL

Title: BOD  
Name: SPIRES, VICKY  
Address: P.O. BOX 53  
City-St-Zip: PINETTA, FL 32350

Title: BOD  
Name: KELLY, RICHARD  
Address: 789 DUSTY MILLER HWY  
City-St-Zip: PINETTA, FL 32350

I hereby 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 all other like empowered.

SIGNATURE: ALLEN C. SHADRICK

CHIE

03/15/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date