

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 23, 2004 8:00 am
Secretary of State

03-23-2004 90009 010 ****61.25

DOCUMENT # 752233

1. Entity Name

HOLLISTER VOLUNTEER FIRE DEPARTMENT, INC.



Principal Place of Business

617 SR 20
PO BOX 314
HOLLISTER FL 32147-0314
US

Mailing Address

PO BOX 314
617 SR 20
HOLLISTER FL 32147-0314
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROBERT HAROLD DAVENPORT
600 HWY 20
PO BOX 565
HOLLISTER FL 32147

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HAWKINS, SHEILA ☒ Delete
STREET ADDRESS HWY 20-620
CITY-ST-ZIP HOLLISTER FL 32147

TITLE PD
NAME DAVENPORT, DONNA M ☐ Delete
STREET ADDRESS 600 SR 20
CITY-ST-ZIP HOLLISTER FL 32147

TITLE TD
NAME MEYERS, MURIEL L ☐ Delete
STREET ADDRESS 141 PALM TRAIL
CITY-ST-ZIP HOLLISTER FL 32147

TITLE S
NAME DAVIS, HERMAN ☒ Delete
STREET ADDRESS TRAVIS LANE-113
CITY-ST-ZIP HOLLISTER FL 32147

TITLE D
NAME WISHAM, DAVID ☐ Delete
STREET ADDRESS HOLLISTER CHURCH ROAD
CITY-ST-ZIP HOLLISTER FL

TITLE D
NAME YOUNG, GWENDOLYN M ☒ Delete
STREET ADDRESS 200 WASHINGTON AVE
CITY-ST-ZIP HOLLISTER FL 32147

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME DAVENPORT, DONNA M. ☒ Change ☐ Addition
STREET ADDRESS 600 SR 20
CITY-ST-ZIP HOLLISTER, FL. 32147

TITLE V
NAME YOUNG, GWENDOLYN M. ☒ Change ☐ Addition
STREET ADDRESS 200 WASHINGTON AVE.
CITY-ST-ZIP HOLLISTER, FL. 32147

TITLE T/S
NAME MEYERS, MURIEL L. ☒ Change ☐ Addition
STREET ADDRESS 141 PALM TRAIL
CITY-ST-ZIP HOLLISTER, FL 32147

TITLE D
NAME WISHAM, DAVID P. ☒ Change ☐ Addition
STREET ADDRESS 105 OSTEEN Rd.
CITY-ST-ZIP HOLLISTER, FL. 32147

TITLE D
NAME Hoyt, Ruth ☐ Change ☒ Addition
STREET ADDRESS 848 Old Gainesville Hwy.
CITY-ST-ZIP HOLLISTER, FL. 32147

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Donna M. Davenport, President* DONNA M. DAVENPORT 3-19-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #