

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752829

FILED
May 09, 2006
Secretary of State

Entity Name: KEY LARGO VOLUNTEER FIRE AND RESCUE DEPARTMENT, INC.

Current Principal Place of Business:

100 EAST DR
KEY LARGO, FL 33037 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 782
KEY LARGO, FL 33037 US

New Mailing Address:

FEI Number: 59-2231676 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SUBIC, SANDRA
99411 OVERSEAS HWY
KEYS ACCOUNTING & TAX SERVICE
KEY LARGO, FL 33037 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: P () Delete
Name: FLEMING, CHRIS
Address: 850 NARRAGANSETT LANE
City-St-Zip: KEY LARGO, FL 33037

Title: ST () Delete
Name: DAVIS, LINDA
Address: 148 PEARL AVENUE
City-St-Zip: TAVERNIER, FL

Title: D () Delete
Name: DAVID, GOW
Address: 32 POMPANO AVE
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: BEAL, IKE
Address: 1 BEAL'S HAMMOCK LANE
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: BLESER, ROBERT
Address: 103680 OVERSEAS HIGHWAY
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: JENKINS, MICHAEL T
Address: P.O. BOX 782
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CONORD, DON
Address: PO BOX 1444
City-St-Zip: KEY LARGO, FL 33037

Title: D (X) Change () Addition
Name: FORRER, JOHN
Address: 300 OCEAN DRIVE #6
City-St-Zip: KEY LARGO, FL 33037

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CHRIS FLEMING

P

05/09/2006

Electronic Signature of Signing Officer or Director

Date