

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754072

FILED
Jun 02, 2009
Secretary of State

Entity Name: OKEECHOBEE COUNTY FIRE RESCUE VOLUNTEER DIVISION, INC.

Current Principal Place of Business:

501 NW 6STREET
OKEECHOBEE, FL 34972 US

New Principal Place of Business:

Current Mailing Address:

501 NW 6STREET
OKEECHOBEE, FL 34972 US

New Mailing Address:

FEI Number: 51-0519005 **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:

CORWIN, MIKE D
2912 NW 35 DR
OKEECHOBEE, FL 34972 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: VP () Delete
Name: TORRES, TIELA
Address: 3467 HWY 70 W
City-St-Zip: BOCA RATON, FL 334972

Title: P () Delete
Name: CORWIN, MIKE
Address: 2912 NW 35 DRIVE
City-St-Zip: OKEECHOBEE, FL 34972

Title: C () Delete
Name: PERVISS, JAMES
Address: 500 N.E. 3 ST.
City-St-Zip: OKEECHOBEE, FL 34972

Title: ST () Delete
Name: HOLTkamp, LISA
Address: 725 SW 85TH AVENUE
City-St-Zip: OKEECHOBEE, FL 34974

Title: D () Delete
Name: SCHILLER, AL
Address: 2304 APPELTON COURT
City-St-Zip: PALM BEACH GARDENS, FL

Title: D (X) Delete
Name: MUROS, MARK
Address: 504 NW 4TH ST
City-St-Zip: OKEECHOBEE, FL 34972

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: WEEKS, LARRY S SR.
Address: 1011 N.W. 7TH COURT
City-St-Zip: OKEECHOBEE, FL 34972

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

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

Title: ST (X) Change () Addition
Name: JOHNSON, MARGIE
Address: P.O. BOX 531
City-St-Zip: OKEECHOBEE, FL 34973

Title: D (X) Change () Addition
Name: MUROS, MARK
Address: 504 NW 4 STREET
City-St-Zip: OKEECHOBEE, FL 34972

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

I hereby certify that the information supplied with this filing does not qualify 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: MARGIE JOHNSON

ST

06/02/2009

Electronic Signature of Signing Officer or Director

Date