

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 08, 2002 8:00 am
Secretary of State

0063253

DOCUMENT # 754321

1. Entity Name

**BEAR CREEK-YOUNGSTOWN VOLUNTEER FIRE DEPARTMENT,
 INCORPORATED**

04-08-2002 90238 003 ****70.00

Principal Place of Business 11711 HWY 231 P.O. BOX 213 YOUNGSTOWN FL 32466 US	Mailing Address P O BOC 213 P.O. BOX 213 YOUNGSTOWN FL 32466 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 11771 Hwy 231	3. Mailing Address P.O. Box 213
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Youngstown, Florida	City & State Youngstown, Florida
Zip 32466	Zip 32466
Country United States	Country United States

4. FEI Number 59-3009146	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRANDON, EUGENE C JR
9222 JAMESWAY
PASNAMA CITY FL 32404

7. Name and Address of New Registered Agent

Name
Eugene C. Brandow, Jr.

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

City
Panama City

FL Zip Code
32404

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.

SIGNATURE **03-05-02**

(NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME PD BRANDOW, EUGENE C JR	<input type="checkbox"/> Delete
STREET ADDRESS 9222 JAMESWAY	
CITY-ST-ZIP PANAMA CITY FL	
TITLE NAME VD CRUM, DUSTIN	<input checked="" type="checkbox"/> Delete
STREET ADDRESS 9239 JAMES WAY	
CITY-ST-ZIP PANAMA CITY FL 32404	
TITLE NAME TD HEDGES, LORI	<input type="checkbox"/> Delete
STREET ADDRESS 10840 COWELS RD.	
CITY-ST-ZIP FOUNTAIN FL	
TITLE NAME SD CRUM, JENNIFER	<input type="checkbox"/> Delete
STREET ADDRESS 9289 JAMES WAY	
CITY-ST-ZIP PANAMA CITY FL 32404	
TITLE NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME Vice President Laura Hayes	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 15026 Joshua Drive	
CITY-ST-ZIP Youngstown, Fl. 32466	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME Crum, Jennifer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 9241 James Way	
CITY-ST-ZIP Panama City, Fl. 32404	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 reports 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: **3-5-02**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)