

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 12, 2005 8:00 am
Secretary of State

04-12-2005 90124 048 ****70.00



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1. Entity Name

BEAR CREEK-YOUNGSTOWN VOLUNTEER FIRE DEPARTMENT, INCORPORATED

Principal Place of Business
 11771 HWY 231
 YOUNGSTOWN FL 32466
 US

Mailing Address
 P.O. BOX 213
 YOUNGSTOWN FL 32466
 US



2. Principal Place of Business

3. Mailing Address

1st MOORE CR2E037 (10/04)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-3009146

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

CRUM, JENNIFER
9241 JAMES WAY
PANAMA CITY FL 32404

Name
Dustin Crum
 Street Address (P.O. Box Number is Not Acceptable)
9241 James Way
 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Dustin R Crum* **Dustin R Crum** **President** **4/6/05**
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, 2005

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	<input checked="" type="checkbox"/> Delete
NAME	CRUM, JENNIFER	
STREET ADDRESS	9241 JAMES WAY	
CITY-ST-ZIP	PANAMA CITY FL 32404	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	HAYES, LAURA	
STREET ADDRESS	15026 JOSHUA DRIVE	
CITY-ST-ZIP	YOUNGSTOWN FL 32466	
TITLE	TD	<input type="checkbox"/> Delete
NAME	HEDGES, LORI	
STREET ADDRESS	10840 COWELS RD.	
CITY-ST-ZIP	FOUNTAIN FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	CASTELLO, BILL	
STREET ADDRESS	15026 JOSHUA DRIVE	
CITY-ST-ZIP	YOUNGSTOWN FL 32466	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Crum, Dustin	
STREET ADDRESS	9241 James Way	
CITY-ST-ZIP	Panama City, Florida 32404	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Eugene Brandow	
STREET ADDRESS	9222 James Way	
CITY-ST-ZIP	Panama City, Florida 32404	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Costello, Bill	
STREET ADDRESS	15026 Joshua Drive	
CITY-ST-ZIP	Youngstown, Fl. 32466	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: *Dustin R Crum* **Dustin R Crum** **4/6/05**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #