

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 07, 2007 8:00 am
Secretary of State

05-07-2007 90060 006 ****61.25



DOCUMENT # 755719

1. Entity Name

CHERRY LAKE VOLUNTEER FIRE RESCUE, INC.

Principal Place of Business

2612 NE CHERRY LAKE CIRCLE
PINETTA FL 32350

Mailing Address

2612 NE CHERRY LAKE CIRCLE
PINETTA FL 32350



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2150220

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NORTON, DAVID W
4498 NE CHERRY LAKE CIRCLE
MADISON FL 32340

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 re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
D	WYNO, FRANK	2684 NE CHERRY LAKE CIRCLE	PINETTA FL 32350	<input type="checkbox"/>
AC	BASS, DOUG	278 NE OLEANDER DR	PINETTA FL 32350	<input type="checkbox"/>
D	SEVOR, EVANS	4180 NW C.R. #253	GREENVILLE FL 32331	<input type="checkbox"/>
D	RAINES, MICHAEL	3312 NW C.R. #150	GREENVILLE FL 32331	<input type="checkbox"/>
P	DAVIS, WALLY	5757 NE ROCKY FORD RD	MADISON FL 32340	<input type="checkbox"/>
C	SINGLETERY, SCOTT	11608 NE ROCKY FORD RD	PINETTA FL 32350	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: _____

David W. Norton
DAVID W. NORTON - TREASURER

4/24/07 (850) 929-4532

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #