

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2001 8:00 am
Secretary of State

0076412

DOCUMENT # 755748

04-03-2001 90070 042 ****70.00

1. Entity Name

MYAKKA VALLEY VOLUNTEER FIRE FIGHTER ASSOCIATION

Principal Place of Business

Mailing Address

5240 MYAKKA VALLEY TRAIL
 SARASOTA FL 34241
 US

5240 MYAKKA VALLEY TR
 SARASOTA FL 34241
 US

736659



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

7232 MYAKKA VALLEY TR.
 Suite, Apt. #, etc.

5261 VANDERIPE RD
 Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2055724

Applied For

Not Applicable

SARASOTA FL.

SARASOTA FL.

Zip

Country

Zip

Country

34241

U.S.

34241

U.S.

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

FORTUNE, LESLIE
 5240 MYAKKA VALLEY TRAIL
 SARASOTA FL 34233

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

5261 VANDERIPE RD
 City SARASOTA **FL** Zip Code 34241

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 Dolores Bannerman Dolores Bannerman SD MARCH 28, 2001
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**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	TD FORTUNE, LESLIE	<input checked="" type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	5240 MYAKKA VALLEY TRAIL SARASOTA FL 34241	
TITLE NAME	SD BANNERMAN, DOLORES	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	5261 VANDERIPE RD SARASOTA FL 34241	
TITLE NAME	VP SKEL, KENNETH	<input checked="" type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	5430 HOWARD CR. RD. SARASOTA FL 34241	
TITLE NAME	PD FERRY, GARY	<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	6683 OLD RANCH RD SARASOTA FL 34241	
TITLE NAME	VP ROBXS, MARK	<input checked="" type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP	7839 SADDLE CREEK TRAIL SARASOTA FL 34241	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS CITY-ST-ZIP		

TITLE NAME	TD TREASURER WIFE, DONALD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	5221 MYAKKA VALLEY TR. SARASOTA, FL 34241	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME	VP FORTUNE, LESLIE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	5240 MYAKKA VALLEY TR. SARASOTA, FL 34241	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME	VP PEEK, REGGIE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS CITY-ST-ZIP	6374 SINGLETREE TR. SARASOTA, FL 34241	
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 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: Dolores Bannerman Dolores Bannerman SD 3/28/01 941-924-2671
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)