2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#756412

FILED Apr 14, 2006 Secretary of State

Entity Name: PINE CASTLE FIRE DEPARTMENT, INC.

Current Principal Place of Business: New Principal Place of Business:

1401 BERWYN ROAD ORLANDO, FL 32806 US

Current Mailing Address: New Mailing Address:

1401 BERWYN ROAD ORLANDO, FL 32806 US

FEI Number: 59-0123456 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WILLIAM, MIMS 108 EAST CENTRAL BOULEVARD ORLANDO, FL 32802 US

OFFICERS AND DIRECTORS:

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

Electronic Olynature of Negistered A

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name
 Name
 Name
 Name

 Address:
 1401 BERWYN RD
 Address:
 1401 BERWYN RD

 City-St-Zip:
 ORLANDO, FL 32806
 City-St-Zip:
 ORLANDO, FL 32806

Title: VD () Delete Title: VD (X) Change () Addition Name: HOWELL, WALT, Name: HOWELL, WALT_

 Name
 NowEtt, Walt

 Address:
 221 E PRINCE ST

 City-St-Zip:
 ORLANDO, FL 32804

 City-St-Zip:
 ORLANDO, FL 32804

 $\label{eq:title:std} \textit{Title:} \qquad \textit{STD} \qquad \textit{()} \; \textit{Delete} \qquad \qquad \textit{Title:} \qquad \textit{STD} \qquad \textit{(X)} \; \textit{Change ()} \; \textit{Addition}$

 Name:
 ANDERSON, DELMA,
 Name:
 ANDERSON, DELMA

 Address:
 5830 NOLAND PLACE NW
 Address:
 3515 CRESTWOOD ST.

 City-St-Zip:
 KENNESAW, GA 30152
 City-St-Zip:
 LAKELAND, FL 33813

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES R. KASPER, JR. PD 04/14/2006