

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # 757598

1. Entity Name
P.A.R.C.O. ARSON CO-OP OF FLORIDA, INC.



Principal Place of Business

P.O. BOX 2507
LARGO, FL 33779 US

Mailing Address

P.O. BOX 2507
LARGO, FL 33779 US



04232008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2099496

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STRONG, STEVE
610 FRANKLIN ST
727-562-4327-EXT. 3039
CLEARWATER, FL 33756

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000927287
05/20/08-80101-003 61.25

10. OFFICERS AND DIRECTORS

TITLE P
NAME STRONG, STEVE
STREET ADDRESS 610 FRANKLIN ST
CITY-ST-ZIP CLEARWATER, FL 33756

TITLE VP
NAME BITTNER, JERRY
STREET ADDRESS 610 FRANKLIN ST
CITY-ST-ZIP CLEARWATER, FL 33756

TITLE TS
NAME KEMERER, RON
STREET ADDRESS 4017 56TH AVE. N.
CITY-ST-ZIP LEALMAN, FL 33714

TITLE D
NAME WHITE, JACK
STREET ADDRESS 10750 ULMERTON RD
CITY-ST-ZIP LARGO, FL 33779

TITLE D
NAME STANTON, DAVE
STREET ADDRESS 201 HIGHLAND AVE
CITY-ST-ZIP LARGO, FL 33770

TITLE D
NAME FLETCHER, JIM
STREET ADDRESS 3007 ALT. 19 N.
CITY-ST-ZIP PALM HARBOR, FL 34683

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Ronald F. Kemmer *Ronald F. Kemmer* Secretary 4/23/08 727-481-5861