FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 21 AM 9:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 758682 (9)

1. Corporation Name
NORTH PALM BEACH VOLUNTEER FIRE DEPARTMENT, INC.

Principal Place of Business	Mailing Address
POST OFFICE BOX 13071 NORTH PALM BEACH FL 33408	POST OFFICE BOX 13071 NORTH PALM BEACH FL 33408

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/09/1981
3a. Date of Last Report: 09/14/1994
4. FEI Number: ~~04-0051200~~ 65-0389579 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21 501 U.S. Highway One	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 North Palm Beach, Florida	City & State 28
Zip / Country 24 33408 / 25 U.S.A.	Zip / Country 29 / 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

PEDUZZI, JOSEPH A
2153 ARDLEY CT.
JUNO ISLES FL 33408

10. Name and Address of New Registered Agent

81 Name: Giarrusso, Peter A
82 Street Address (P.O. Box Number Is Not Acceptable): 3852 Begonia Street.
83
84 City: Palm Beach Gardens FL 85 Zip Code: 33410

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Peter A. Giarrusso President 4/7/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	PEDUZZIG, JOSEPH A	1.2 NAME	Giarrusso, Peter A.	
STREET ADDRESS	2153 ARDLEY CT.	1.3 STREET ADDRESS	3852 Begonia Street.	
CITY-ST-ZIP	JUNO ISLES FL 33408	1.4 CITY-ST-ZIP	Palm Beach Gardens FL 33410	
TITLE	VD	2.1 TITLE	VD	☒ Change ☐ Addition
NAME	PICARD, WILLIAM	2.2 NAME	Peduzzi, Joseph A.	
STREET ADDRESS	1500 CRESENT CIR. APT. 27	2.3 STREET ADDRESS	2153 Ardley Ct.	
CITY-ST-ZIP	LAKE PARK FL 33403	2.4 CITY-ST-ZIP	Juno Isles FL 33408	
TITLE	SD	3.1 TITLE	SD	☒ Change ☐ Addition
NAME	GIARRUSSO, PETER A	3.2 NAME	Giarrusso, Louis A.	
STREET ADDRESS	3852 BEYONIA ST.	3.3 STREET ADDRESS	10233 Seagrape Way.	
CITY-ST-ZIP	PALM BCH. GARDENS FL 33410	3.4 CITY-ST-ZIP	Palm Beach Gardens FL. 33410	
TITLE	TD	4.1 TITLE	TD	☒ Change ☐ Addition
NAME	FAUCI, LARRY	4.2 NAME	Leber, Christopher	
STREET ADDRESS	1031 SINGER DR.	4.3 STREET ADDRESS	11786 Lakeshore Place	
CITY-ST-ZIP	SINGER ISLAND FL 33404	4.4 CITY-ST-ZIP	North Palm Beach FL. 33408	
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 with changes, or on an attachment with an address.

SIGNATURE: Peter A. Giarrusso 1/27/95 (407) 863-FIRE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

COR-8210