2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758682

FILED May 06, 2004 Secretary of State

Entity Name: NORTH PALM BEACH VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:				New Principal Place of Business:	
	IGHWAY ONE ALM BEACH, F	L 33408 US			
Current Mailing Address:				New Mailing Addre	ss:
	FICE BOX 1307 ALM BEACH, F	•			
FEI Number:	65-0389579	FEI Number Applie	d For () FEI N	umber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent					
GIARRUSSO, PETER A 2321 23RD LANE PALM BEACH GARDENS, FL 33418				GIARRUSSO, PETER A 9889 DOGWOOD AVENUE PALM BEACH GARDENS, FL 33410	
The above in the State		ubmits this statem	ent for the purpose	of changing its register	red office or registered agent, or both,
SIGNATURE:					05/06/2004
	Electroni	ic Signature of Reg	jistered Agent		Date
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DV () Delete MARTINEZ, JOSE 124 BLACK OLIVE CRESCENT ROYAL PALM BEACH, FL 33411		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DP () Delete GIARRUSSO, PETER A 2321 23RD LANE PALM BEACH GARDENS, FL 33418		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT () Delete WINEWSKI, FRANK 5923 GOLDEN EAGLE CIRCLE PALM BEACH GARDENS, FL 33418			Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	DS () Delete RIVERA, HECTOR 2856 TENNIS CLUB DR WEST PALM BEACH, FL 33414		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PETER GIARRUSSO DP 05/06/2004