2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#758682

FILED Sep 01, 2007 Secretary of State

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

urrent F	Principal Place of Business:	New Principal Pl	ace of Business:
	HIGHWAY ONE ALM BEACH, FL 33408 US		
Current N	failing Address:	New Mailing Add	dress:
	FICE BOX 13071 PALM BEACH, FL 33408		
	r: 65-0389579 FEI Number Applied For() Fl nce with s. 607.193(2)(b), F.S., the corporation did not rec	El Number Not Applicable (eive the prior notice.) Certificate of Status Desired ()
lame and	d Address of Current Registered Agent:	Name and Addre	ss of New Registered Agent:
9889 DOG	SSO, PETER A GWOOD AVENUE ACH GARDENS, FL 33410 US		
	e named entity submits this statement for the purpose of Florida	ose of changing its regis	stered office or registered agent, or both,
n the Stat	e of Florida.	ose of changing its regis	stered office or registered agent, or both,
n the Stat	e of Florida. RE:	ose of changing its regis	
the Stat	e of Florida.	ose of changing its regis	stered office or registered agent, or both, Date
n the Stat SIGNATU	e of Florida. RE:		
n the Stat SIGNATU	RE: Electronic Signature of Registered Agent		Date
on the State CIGNATU DFFICER itle: ame: ddress: ity-St-Zip: itle: ame: ddress:	e of Florida. RE: Electronic Signature of Registered Agent S AND DIRECTORS: DV () Delete PEDUZZI, JOSEPH A 2321 23RD LANE	ADDITIONS/CHA Title: Name: Address:	Date ANGES TO OFFICERS AND DIRECTO
n the Stat SIGNATU DFFICER itle: ame: ddress:	Electronic Signature of Registered Agent S AND DIRECTORS: DV () Delete PEDUZZI, JOSEPH A 2321 23RD LANE PALM BEACH GARDENS, FL 33418 DP () Delete GIARRUSSO, PETER A 9889 DOGWOOD AVENUE	ADDITIONS/CHA Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ANGES TO OFFICERS AND DIRECTO () Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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: PETER GIARRUSSO DP 09/01/2007