ANNUAL REPORT       Image: Control and Secretary of State         1998       DOCUMENT # 758996       (3)         DOCUMENT # 758996       (3)         THE MADISON COUNTY VOLUNTEER FIREMAN, INC.       Image: Control and Control	NC			ING FEE IS \$61.		Apr 23 1998	8.00am
CCULMENT # 758996       (3)         THE MADISON COUNTY VOLUNTEER FIREMAN, INC.         Incipal Proce of Businesis       Maling Address         Bit Address of Expension       Maling Address         Bit Address of Businesis       Life Bit Monte State         State Aut A dec       21         Decompare Financing       Part Address of Bits         State Aut A dec       21         City & State       2         Decompare Hitter Hyperit Text Use Address of Current Registered Agent         Business Address of Current Registered Age		PORATIO	N SA	Secre	<b>B. Mortham</b> tary of State		
Corporation Name Corporation Name Corporation Name Corporation THE MADISON COUNTY VOLUNTEER FIREMAN, INC.   THE MADISON FL 3240   THE MADISON FL 3240  THE MADISON FL 3240  THE MADISON FL 3240  THE MADISON FL 3240  THE MADISON FL 3240  THE MADISON FL 3240  THE MADISON FL 344  THE MADIS			# 75800			-	
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US         59-2916292         Net Applicable           Principal Place of Business         24.         Mailing Address         6.         Certification of Business         \$8.756 Address           Solite. Apl. #, etc.         2         Suite. Apl. #, etc.         2         File Plaqued Controlution         Address         \$5.000 Mey Be           Cley & State         Cley & State         Cley & State         7.         Is this comportation a homeownere association?           2         2         Cley & State         7.         Is this comportation a homeownere association?           2         2         Cley & State         2         The comportation and a homeownere association?           3         3         Principal Place Address of New Registered Agent         8.         The comportation and access of New Registered Agent           116 SW DADE ST         Principal Place Address of New Registered Agent         18.         Name         18.1           BURTING, WILLIAM         182         Stread Address (P.C. Box Number is Not Acceptable)         18.1           116 SW DADE ST         183         2         183         2         18.2           MADISON FL S2340         183         18.2         Decomportation submits this statement for the purpowee of biocides for Decomportation submits this statement for the purpowee Decomportation submits this statem	6 SW DADE O RAYMOND NDISON FL 3	ST PINKARD		116 SW DADE ST C/O RAYMOND PINKARE MADISON FL 32340	)	06/30/1981	
asi     6. Centrace of Saluta Detired     Fee Regulated       Suite, Apt #, etc.     27     Suite, Apt #, etc.     35.00 May Be       City & State     27     Cust Fund Contribution     Addet to Fees.       City & State     7. Is this nonprofil corporation a knownew association?     Vise       Zip     Country     27     Country     28       Zip     Country     27     Country     10. This compariton owne or tas paid the current year hiangbile       Zip     Country     28     20     Personal Property Tax 400 June 30.       R. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent       BUNTING, WILLIAM     182     Street Address (P.O. Box Number is Not Acceptable)       BUNTING, WILLIAM     182     Street Address (P.O. Box Number is Not Acceptable)       BUNTING, WILLIAM     182     Street Address (P.O. Box Number is Not Acceptable)       BUNTING, WILLIAM     182     Street Address (P.O. Box Number is Not Acceptable)       BUNTING, WILLIAM     182     Street Address (P.O. Box Number is Not Acceptable)       Contract of Address of Novida     Street Address (P.O. Box Number is Not Acceptable)       BUNTING, WILLIAM     193     Street Address (P.O. Box Number is Not Acceptable)       Contract of Street Address of Novida     Street Address (P.O. Box Number is Not Acceptable)       Contract o	•						Not Applicable
Price Fund Contribution         Added to Fees           City & State         Thest Fund Contribution         Added to Fees           City & State         City & State         Thest Fund Contribution         Added to Fees           Zp         Zp         Country         Zp         Zp         Country         Zp         Zp         Country         Zp         Zp <thzp< th=""></thzp<>	Principal Pl	lace of Busine	88			5. Certificate of Status Desired	
City & State     City & State     T. Is this nonprofit corporation a boncowner association?       Zip     Zip     Zip     Zip     Zip       Zip     Zip     Zip     Zip     Zip       B. Name and Address of Current Registered Agent     B. This corporation owes or has paid to current year Intangible Personal Property Tax dia-June 30.     Clive S Intel Personal Property Tax dia-June 30.     Clive S Intel Personal Property Tax dia-June 30.       BUNTING, WILLIAM     BI     Name     Street Address of New Registered Agent       Bit SW DADE ST     Bit     Street Address of New Registered Agent       Bit SW DADE ST     Bit     Street Address (P.O. Box Number is Not Acceptable)       It SW DADE ST     Bit     Street Address (P.O. Box Number is Not Acceptable)       Personal to the provisions of Sections E17.0502 and 617.1508. Florida Statutes, the above-named corporation submits this Blatement for the purpose of changing its registered agent are information and particle of Parity Statutes       CMATURE     Street Address Of Corporation Subord of directors. Thereby accept the appointent as registered agent are information. Subord of directors. Thereby accept the appointent as registered agent are information. Subord of directors. Thereby accept the appointent as registered agent are information. Subord of directors. Thereby accept the appointent as registered agent are information. Subord of directors. Thereby accept the appointent as registered agent are information. Subord of directors. Thereby accept the appointent as registered agent are informatin an equitatinate.       CMATURE <td>Suite, Apt.</td> <td>#, etc.</td> <td></td> <td></td> <td></td> <td></td> <td></td>	Suite, Apt.	#, etc.					
Zip       Country       20       Country       8. This corporation owas or has paid the current year Intangible         Performant Property Tax doug June 30       Ives       I	City & State	Ð		City & State		7. Is this nonprofit corporation a homeowners	association?
	Zip		- ·	Zip		8. This corporation owes or has paid the curre	nt year Intangible
BUNTING, WILLIAM 116 SW DADE ST MADISON FL 32340       Image: Comparison of Socions 617 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, or the Statu of Florida, Such changing a such oracid by the corporation submits this statement for the purpose of changing its registered office or registered agent, or both, or the Statu of Florida, Such changing a such oracid by the corporation submits this statement for the purpose of changing its registered office or registered agent agent, or both, or the Statu of Florida, Such changes Statutes.       Image: Comparison submits this statement for the purpose of changing its registered office or registered agent ag							gent
116 SW DADE ST MADISON FL 32340       9         64       City       FL       65       Zip Code         64       City       FL       65       Zip Code         64       City       FL       66       Zip Code         64       City       FL       66       Zip Code         65       Zip Code       66       Zip Code       66       Zip Code         66       City       FL       66       Zip Code       66       Zip Code         67       City       FL       66       Zip Code       66       Zip Code         67       City       FL       66       Zip Code       20       66<	BUNTINK	g, William				ress (P.O. Box Number is Not Acceptable)	
MUDSON FL 2240	116 SW	DADE ST					
Prevani to the provisions of Sactions 617 0502 and 617 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agont, i and accept the objection of the objectio					1		
agent.1 am lamilary glb, and accept the obligetment of Stattper ET/1450, Except a Statutes.       DATE         GNATURE Levels in the second	MADISO				84 City		85 Zip Code
Image: Control of the control of th			ns of Sections 617.050	2 and 617 1508 Florida Stat			
weil     STONE, THOMAS E     12 MAME       EET ADDRESS     204 NW 2ND PL     13 STREET ADDRESS       Y-ST-ZIP     MADISON FL     14 CITY-ST-ZIP       EE     STD     DELETE     21 TITLE       Weil     PINKARD, RAYMOND     22 MAME       SET ADDRESS     415 SW HORRY STREET     23 STREET ADDRESS       Y-ST-ZIP     MADISON FL     24 CITY-ST-ZIP       MADISON FL     24 CITY-ST-ZIP     Change       Addition     22 MAME       SET ADDRESS     33 STREET ADDRESS       Y-ST-ZIP     MADISON FL     24 CITY-ST-ZIP       LE     D     DELETE     31 TITLE       WE BAKER, RICHARD     22 MAME     24 AME       LE     D     DELETE     31 TITLE       LE     D     DELETE     31 TITLE       LE     D     DELETE     31 STREET ADDRESS       VIC SU S 90 EAST     33 STREET ADDRESS     34 CITY-ST-ZIP       LE     D     DELETE     34 CITY-ST-ZIP       Ket ADDRESS, HOWELL     42 NAME     42 NAME       Ket ADDRESS, SOTS     901 SE BUNKER STREET     43 STREET ADDRESS       Y-ST-ZIP     MADISON FL     44 CITY-ST-ZIP     Change       LE     D     DELETE     51 TITLE       LE     D     DELETE	Pursuant f office or re agent. I a	to the provisio egistered age m familiar with	and accept the oblig	entons of, Section 617, 9503, 1	utes, the above-named cor s authorized by the corpora Florida Statutes.	poration submits this statement for the purpose of c tion's board of directors. I hereby accept the appoint	
WEET ADDRESS       204 NW 2ND PL       13 STREET ADDRESS         Y-ST-ZIP       MADISON FL       1 delFY-ST-ZIP         LE       STD       DELETE       21 NTLE         WE       PMIXCARD, RAYMOND       22 NAME         WE TADDRESS       415 SW HORRY STREET       23 STREET ADDRESS         Y-ST-ZIP       MADISON FL       2 4 CITY-ST-ZIP         LE       D       DELETE       31 TITLE         WE BAKEER, RICHARD       20 AMME       20 AMME         V-ST-ZIP       MADISON FL       2 4 CITY-ST-ZIP         LE       D       DELETE       31 TITLE         WE BAKEER, RICHARD       20 AMME       20 MAME         VF-ST-ZIP       MADISON FL       3 STREET ADDRESS         VF-ST-ZIP       MADISON FL       3 STREET ADDRESS         VF-ST-ZIP       MADISON FL       10 DELETE         VF-ST-ZIP       MADISON FL       10 DELETE         VF-ST-ZIP       MADISON FL       2 AMME         VF-ST-ZIP       MADISON FL       10 DELETE         VF-ST-ZIP       10 DELETE<	Pursuant f office or ri agent. I a GNATURE	to the provisio egistered age m familiar with	printed name of registered age	ent and life if a, plauble	utes, the above-named cor a authorized by the corpora Florida Statutes.	poration submits this statement for the purpose of c tion's board of directors. I hereby accept the appoint red when renstating) DATE	hanging its registered ntment as registered
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AL       PINKARD, RAYMOND       22 NAME         EET ADDRESS       415 SW HORRY STREET       23 SIREET ADDRESS         (-S1-2P       MADISON FL       24 GITY-S1-2P         E       D       DELETE       31 TITLE         AE       BAKER, RICHARD       32 NAME         BAKER, RICHARD       32 NAME       33 STREET ADDRESS         US 90 EAST       33 STREET ADDRESS       34 GITY-ST-ZIP         MADISON FL       34 GITY-ST-ZIP	Pursuant t office or ru agent. I a GNATURE <u>1</u> E	to the provisio egistered aget m familiar with Storature, speed or D STONE, T	printed name of required age OFFICERS AN	and life if a character for the first of the	utes, the above-named cor s authorized by the corpora Forida Statutes. Dife Registered Agent sprature requ 13. 1.1 TILLE 1.2 NAME	poration submits this statement for the purpose of c tion's board of directors. I hereby accept the appoint red when renstating) ADDITIONS/CHANGES TO OFFICERS AND D	hanging its registered ntment as registered
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e       BAKER, RICHARD       32 NAME         Let ADDRESS       US 90 EAST       33 STREET ADDRESS         -SI-2IP       MADISON FL       34. CITY-SI-ZIP         e       D       DELETE       4.1 TITLE         iet       EDWARDS, HOWELL       4.2 NAME         set ADDRESS       901 SE BUNKER STREET       4.3 STREET ADDRESS         -SI-2IP       MADISON FL       4.4 CITY-SI-ZIP         iet       D       DELETE       5.1 TITLE         iet       D       DELETE       5.1 TITLE         iet       BUNTING, WILLIAM       5.2 NAME         iet       BUNTING, WILLIAM       5.3 STREET ADDRESS         iet       BUNTING, WILLIAM       5.3 STREET ADDRESS         istreet ADDRESS       103 2ND PLACE       5.3 STREET ADDRESS         istreet ADDRESS       103 2ND PLACE       5.4 CITY-ST-ZIP         iet       PD       DELETE       6.1 TITLE         iet ADDRESS       105 2NAME       6.3 STREET ADDRESS         iet ADDRESS       116 SW DADE ST       6.3 STREET ADDRESS         istreet ADDRESS       116 SW DADE ST       6.3 STREET ADDRESS         istreet ADDRESS       116 SW DADE ST       6.3 STREET ADDRESS	Pursuant t office or r agent. I au SNATURE 1 E E E E E E E E E E E E E E E E E E	to the provisio egistered ager lamiliar with Stoute, pred of STONE, T 204 NW 2 MADISON STD PINKARD,	OFFICERS AN OFFICERS AN HOMAS E ND PL I FL	Settons of, Sector 617.0503.1	utes, the above-named corr southorized by the corpora Forida Statutes. TE: Registered Agent signature required 13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-2IP 2.1 TITLE 2.2 NAME	PL poration submits this statement for the purpose of c tion's board of directors. I hereby accept the appoin red when renstating) ADDITIONS/CHANGES TO OFFICERS AND D	hanging its registered ntment as registered
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. I hereby certify that the Information supplied with this filing 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	Pursuant f office or n agent. I az GNATURE <u>1</u>	to the provisio egistered ager mamilar with Stone, T 204 NW 2 MADISON STD PINKARD, 415 SW H MADISON D BAKER, R US 90 EA MADISON D EDWARDS 901 SE B MADISON D BUNTING, 103 2ND MADISON PD WYNO, FI	And eccept the object OFFICERS AN OFFICERS AN HOMAS E ND PL I FL RAYMOND HORRY STREET I FL ICHARD ST I FL ICHARD ST I FL INKER STREET I FL WILLIAM PLACE FL RANK	entons of, Sector 617.0503, International of the sector o	Utes, the above-named cor southorized by the corpora Florida Statutes. DTE: Registered Agent signature requinations 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	poration submits this statement for the purpose of c tion's board of directors. I hereby accept the appoint additional termstating) DATE ADDITIONS/CHANGES TO OFFICERS AND D C	hanging its registered htment as registered  DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition Addition Addition Addition
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