2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2008
Secretary of State

DOCUMENT# 760571

Entity Name: LIBERTY FIRE DISTRICT, INC.

Current Principal Place of Business:

3910 KING LAKE ROAD
DEFUNIAK SPRINGS, FL 32433 US

New Principal Place of Business:

Current Mailing Address:

3910 KING LAKE ROAD
DEFUNIAK SPRINGS, FL 32433 US

New Mailing Address:

FEI Number: 59-2403781 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GIVENS, PHILLIP A
3910 KING LAKE ROAD
DEFUNIAK SPRINGS, FL 32433 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GIVENS, PHILLIP A
Address: 3910 KING LAKE ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433 US

Title: VP ( ) Delete
Name: HAGAN, JAMES
Address: 7645 U.S HWY 311 NORTH
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: T ( ) Delete
Name: BOTTOMS, PATRICIA A
Address: 7529 N.E. HWY. 3314
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: S ( ) Delete
Name: GRALEY, NANCY
Address: 71 HEWARD JONES ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: MBR ( ) Delete
Name: ROGER, ROY
Address: 366 PARADISE ISLAND DRIVE
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: HAGAN, JAMES
Address: 7645 U.S HWY 331 NORTH
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: T (X) Change ( ) Addition
Name: BOTTOMS, PATRICIA A
Address: 7529 N.. HWY. 331
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: S (X) Change ( ) Addition
Name: GRALEY, NANCY
Address: 71 HOWARD JONES ROAD
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: PHILLIP A. GIVENS P 02/13/2008

Electronic Signature of Signing Officer or Director — Date