2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2008
Secretary of State

DOCUMENT# 761593

Entity Name: PITTMAN VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:

2362 HIGHWAY 2
BONIFAY, FL 32425

New Principal Place of Business:

2294 HIGHWAY 2
BONIFAY, FL 32425

Current Mailing Address:

1553 HWY 179
BONIFAY, FL 32425 US

New Mailing Address:

FEI Number: 35-2170575 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CRUTCHFIELD, DEWEY
1553.HWY 179
BONIFAY, FL 32425 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: D ( ) Delete
Name: SELLERS, ALFERD
Address: 1612 HOLLIDAY RD
City-St-Zip: BONIFAY, FL 32425

Title: VD ( ) Delete
Name: BELYEU, KENNETH B
Address: 2389 JW MILLER RD
City-St-Zip: BONIFAY, FL 32425

Title: TD ( ) Delete
Name: LEWIS, RAY
Address: 2423 JW MILLER RD
City-St-Zip: BONIFAY, FL 32425

Title: PD ( ) Delete
Name: CRUTCHFIELD, DEWEY
Address: 1553 HWY 179
City-St-Zip: BONIFAY, FL 32425

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: HATCHER, RANDAL N
Address: 2422 J W MILLER RD
City-St-Zip: BONIFAY, FL 32425

Title: VD (X) Change ( ) Addition
Name: SELLERS, ALFERD
Address: 1612 HOLLIDAY RD
City-St-Zip: BONIFAY, FL 32425

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

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: DEWEY CRUTCHFIELD PD 04/27/2008

Electronic Signature of Signing Officer or Director — Date