

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 05, 2004
Secretary of State**

DOCUMENT# 762373

Entity Name: DORCAS FIRE DISTRICT, INC.

Current Principal Place of Business:

5871 HWY 393
CRESTVIEW, FL 32539 US

New Principal Place of Business:

Current Mailing Address:

5871 HWY 393
CRESTVIEW, FL 32539 US

New Mailing Address:

FEI Number: 59-2367539 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GATLIN, JIMMY
4408 POVERTY CREEK
CRESTVIEW, FL 32539 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: C () Delete
Name: WARD, CHARLES D
Address: 4171 LAKEVIEW DR
City-St-Zip: CRESTVIEW, FL 32539

Title: D () Delete
Name: MCCALLUM, JERRY
Address: 5599 HIGHWAY 393
City-St-Zip: CRESTVIEW, FL 32539

Title: ST () Delete
Name: GATLIN, JIMMY E
Address: 4408 POVERTY CREEK RD
City-St-Zip: CRESTVIEW, FL 32539

Title: D () Delete
Name: WARD, LARRY
Address: 4385 JACK POWELL RD
City-St-Zip: CRESTVIEW, FL 32539

Title: D () Delete
Name: SMITH, JAMES
Address: 4238 COUNTRY BREEZE LANE
City-St-Zip: CRESTVIEW, FL 32539

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: WEEKLEY, JERRY
Address: 4138 PAINTER BRANCH ROAD
City-St-Zip: CRESTVIEW, FL 32539

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: JIMMY GATLIN

ST

01/05/2004

Electronic Signature of Signing Officer or Director

_____ Date