

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763744

FILED  
Mar 10, 2012  
Secretary of State

**Entity Name:** GRITNEY VOLUNTEER FIRE DEPARTMENT, INC.

**Current Principal Place of Business:**

2141 TOBE RETHERFORD ROAD  
BONIFAY, FL 32425 US

**New Principal Place of Business:**

**Current Mailing Address:**

2267 BONIFAY GRITNEY RD  
BONIFAY, FL 32425

**New Mailing Address:**

**FEI Number:** 59-2966234

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HALL, JERRY  
1892 POLLARD HARRIS RD.  
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: P  
Name: HALL, JERRY  
Address: 1892 POLLARD HARRIS RD  
City-St-Zip: BONIFAY, FL 32425

Title: V  
Name: CREWS, CLIFTON  
Address: 2137 TOBE RETHERFORD ROAD  
City-St-Zip: BONIFAY, FL 32425

Title: S  
Name: ROGERS, BRENDA  
Address: 2267 BONIFAY GRITNEY RD  
City-St-Zip: BONIFAY, FL 32425

Title: T  
Name: MARSH, BECKY  
Address: 2363 BONIFAY GRITNEY ROAD  
City-St-Zip: BONIFAY, FL 32425

Title: BM  
Name: MARSH, J.WAYNE  
Address: 2438 MARSH ROAD  
City-St-Zip: BONIFAY, FL 32425

Title: BM  
Name: JONES, STEPHEN  
Address: 1799 HIGHWAY 179  
City-St-Zip: BONIFAY, FL 32425

I hereby 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 all other like empowered.

SIGNATURE: JERRY HALL

P

03/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date