

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2005 8:00 am
Secretary of State

03-24-2005 90028 015 ****61.25

DOCUMENT # 764719 1. Entity Name JAY VOLUNTEER FIRE DEPARTMENT, INC.					
Principal Place of Business 12781 HWY. 89 PO BOX 512 JAY, FL 32565			Mailing Address 12781 HWY. 89 PO BOX 512 JAY, FL 32565		
2. Principal Place of Business 13444 HWY. 89 Suite, Apt. #, etc. PO BOX 512		3. Mailing Address 13444 HWY. 89 Suite, Apt. #, etc. PO BOX 512			
City & State JAY, FL		City & State JAY, FL		4. FEI Number 59-2897821	
Zip 32565		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WESTMORELAND, J. LOFTON 800 CAROLINE ST MILTON, FL 32570			7. Name and Address of New Registered Agent Name COZART, STEPHEN M. Street Address (P.O. Box Number is Not Acceptable) 125 W. ROMANA ST. SUITE 150 City PENSACOLA FL Zip Code 32502		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: STEPHEN M. COZART 3/12/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE : PD NAME : EDWARDS, ALON STREET ADDRESS : 2800 NELSONTOWN RD CITY-ST-ZIP : JAY, FL 32565	<input checked="" type="checkbox"/> Delete		TITLE : PD NAME : EDWARDS, ALAN STREET ADDRESS : 2108 MINERAL SPRINGS RD CITY-ST-ZIP : JAY, FL 32565	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE : VD NAME : LEFORE, MARK STREET ADDRESS : 3874 EBENEZER RD CITY-ST-ZIP : JAY, FL 32565	<input checked="" type="checkbox"/> Delete		TITLE : VD NAME : LEFLORE, MARK STREET ADDRESS : 3874 EBENEZER CHURCH RD CITY-ST-ZIP : JAY, FL 32565	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE : D NAME : COZART, TONY STREET ADDRESS : 3775 GREENWOOD RD CITY-ST-ZIP : JAY, FL 32565	<input type="checkbox"/> Delete		TITLE : NAME : STREET ADDRESS : CITY-ST-ZIP :	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE : S NAME : ODOM, GREGG STREET ADDRESS : 5225 PITNIC RD CITY-ST-ZIP : JAY, FL 32565	<input checked="" type="checkbox"/> Delete		TITLE : SD NAME : ODOM, GREG STREET ADDRESS : 5223 PITNIC RD CITY-ST-ZIP : JAY, FL 32565	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE : D NAME : BOUTWELL, BILLY STREET ADDRESS : 3600 GREENWOOD RD CITY-ST-ZIP : JAY, FL 32565	<input checked="" type="checkbox"/> Delete		TITLE : D NAME : MCCURDY, JOE STREET ADDRESS : 15303 HWY. 89 CITY-ST-ZIP : JAY, FL 32565	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE : D NAME : SHAWN, JARRELL STREET ADDRESS : HWY 89 CITY-ST-ZIP : JAY, FL 32565	<input type="checkbox"/> Delete		TITLE : NAME : STREET ADDRESS : CITY-ST-ZIP :	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Alan Edwards 3-21-05 88675-4904 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					