

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765260

FILED
Jan 06, 2009
Secretary of State

Entity Name: MC DAVID VOLUNTEER FIRE DEPARTMENT, INCORPORATED

Current Principal Place of Business:

100 N CENTURY BLVD.
MCDAVID, FL 32568

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 3402
MCDAVID, FL 32568 US

New Mailing Address:

FEI Number: 59-2252415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILMORE, ERIC
4100 W. HWY H
CENTURY, FL 32535 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: PD () Delete
Name: GODWIN, WAYNE
Address: 941 HWY 164
City-St-Zip: MCDAVID, FL 32568

Title: SD () Delete
Name: MALONE, PHYLLIS
Address: 201 W. ROACH RD
City-St-Zip: MCDAVID, FL 32568

Title: VD () Delete
Name: KINLEY, LARRY
Address: 680 HWY 164
City-St-Zip: MCDAVID, FL 32568

Title: 2VP () Delete
Name: CARTER, MATT
Address: 470 W. ROACH RD
City-St-Zip: MC DAVID, FL 32568

Title: T () Delete
Name: HAWKINS, CHRIS
Address: 9311 HWY. 97
City-St-Zip: CENTURY, FL 32535

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: () 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: ERIC GILMORE

MR.

01/06/2009

Electronic Signature of Signing Officer or Director

Date