

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 02, 2001 8:00 am
Secretary of State

03-02-2001 90089 011 *****61.25

DOCUMENT # 766117

1. Entity Name

DUETTE VOLUNTEER FIRE/RESCUE DEPARTMENT, INC.

Principal Place of Business

Mailing Address

34010-SR 62
 DUETTE FL 33834
 US

3401-SR 62
 DUETTE FL 33834
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2964858

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WALKER, DAVID L
33050 TAYLOR GRADE RD
BOWLING GREEN FL 33834

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

David L. Walker

David L. Walker
Treasurer

2/27/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Delete
 NAME **D**
 STREET ADDRESS **LEONARD, JIM**
 CITY-ST-ZIP **31550 HWY 62**
DUETTE FL 33834

TITLE ☒ Change ☐ Addition
 NAME **STEWART, Rick**
 STREET ADDRESS **7945 Bunker Hill Rd.**
 CITY-ST-ZIP **DueTte, Fla. 33834**

TITLE ☐ Delete
 NAME **T**
 STREET ADDRESS **WALKER, DAVID**
 CITY-ST-ZIP **33050 TAYLOR GRADE RD**
DUETTE FL 33834

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Delete
 NAME **D**
 STREET ADDRESS **TAPPAN, WADE**
 CITY-ST-ZIP **30902 TAYLOR GRADE RD**
DUETTE FL

TITLE ☒ Change ☐ Addition
 NAME **O'Connor, John**
 STREET ADDRESS **11075 Taylor Grade Rd.**
 CITY-ST-ZIP **DueTte, Fla. 33834**

TITLE ☒ Delete
 NAME **D**
 STREET ADDRESS **GLASSBURN, BETTY**
 CITY-ST-ZIP **KEENTOWN RD**
DUETTE FL 33834

TITLE ☒ Change ☐ Addition
 NAME **Parrish Clyde**
 STREET ADDRESS **2831-Bill Parrish Rd.**
 CITY-ST-ZIP **DueTte, Fla. 33834**

TITLE ☐ Delete
 NAME **S**
 STREET ADDRESS **KEEN, DONNA L.**
 CITY-ST-ZIP **8103 KENN CEMETARY ROAD**
BOWLING GREEN FL

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Delete
 NAME **P**
 STREET ADDRESS **O'CONNOR, JOHN**
 CITY-ST-ZIP **11075 TAYLOR GRADE ROAD**
BOWLING GREEN FL

TITLE ☒ Change ☐ Addition
 NAME **Leonard, Jim**
 STREET ADDRESS **30520 SR 62**
 CITY-ST-ZIP **DueTte, Fla. 33834**

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: *David L. Walker* *Treasurer* *David L. Walker* *2/14/01* *(941) 722-1744*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)