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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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1996

SIGNATURE:

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(3)

DOCUMENT # 1. Corporation Name SOUTHWEST BROWARD VOLUNTEER FIRE AND RESCUE,INC.

Principal Place	e of Business	Mailing Address			in aren bibir albis bibit arbit bibit 1881
14481 SW 47		10335 SW 50TH CT			
FT6 LADUER US	DALE FL 33330	COOPER CITY FL 333	28		
US		US		3. Date Incorporated or Qualified	3a. Date of Last Report
				03/02/1983	07/13/1995
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
<u></u>		26		NOT APPLICABLE	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		27		T. Co. Milesto G. Citates Decired	Fee Required
Olly & Stati	е	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution	AQQ60 to Fees
l [']	25	29	30	8. This corporation has liability for inter-	angible tax under s. 199.032, Yas XNo
	9. Name and Address of Curre			10. Name and Address of New Reg	pistered Agent
			81 Name		
CHRISD	TENSEN, RICAHRD R SR		SA CARGOLANI	description of the American Market and the American Ma	
	W 50TH CT		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
COOPER	R CITY FL 33328		83		
			a		
			B4 City		FL 85 Zip Code
i. Pursuant i	to the provisions of Sections 617.0502	2 and 617.1508, Florida Statut	tes, the above-named coroo	pration submits this statement for the nurvo	ase of changing its registered office
or register	red agent, or both, in the State of Flori ith, and accept the obligations of Sec	ida. Such change was authoria	zed by the corporation's boo	oration submits this statement for the purporard of directors. I hereby accept the appoin	Itment as registered agent. I am
	iti, and accept the obligations of, sec	NON 617 JOSOS, FIORIDA STATUTE	S.		
ON THE SEC	DICHARN D. INDIC	THUCKAL IA			
GNATURE _	RICHARD R. CHRIS	TENSUN SR.			2-2-96
GNATURE _	Signature, typed or printed name of registered agen	TENSUN 5R. t and title if applicable (Ne	OTE: Registered Agent signature requir	ed when rainslating)	2-2-96 DATE
GNATURE _	Signature, typed or printed name of registered agen	TENSEN 3.R. t and title if applicable (No. ID DIRECTORS	OTE: Registered Agent signature require		2-2-96 DATE ERS AND DIRECTORS IN 12
GNATURE _	Signature, typed or printed name of registered agen OFFICERS AN	t and title if applicable (NIII) ID DIRECTORS	OTE: Registered Agent signature require 13. 1.1 TIFLE	ed when rainslating)	2-2-96 DATE
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