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Jan 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **768961** (5)

1. Corporation Name

CRYSTAL RIVER FIRE DEPARTMENT, INC.

Principal Place of Business

Mailing Address

123 NW HIGHWAY 19
CRYSTAL RIVER FL 34428
US

123 NW HIGHWAY 19
CRYSTAL RIVER FL 34428
US

3. Date Incorporated or Qualified

06/16/1983

4. FEI Number

59-2536303

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DUMAS, BROWN JR.
291 SOUTH GARDENIA TERRACE
CRYSTAL RIVER FL 34423

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

TITLE PD
NAME SKIDMORE, LARRY J., SR
STREET ADDRESS 715 NE 13TH STREET
CITY-ST-ZIP CRYSTAL RIVER FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE DV
NAME DAVIS, BILL
STREET ADDRESS 6380 N. DIAMOND TERRACE
CITY-ST-ZIP CRYSTAL RIVER FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DVT
NAME DUMAS, JACK
STREET ADDRESS 419 NE CRYSTAL STREET
CITY-ST-ZIP CRYSTAL RIVER FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DS
NAME CATES, TERRY
STREET ADDRESS 9415 W WISCONSIN CT.
CITY-ST-ZIP CRYSTAL RIVER FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DV
NAME DUMAS, BROWN
STREET ADDRESS 291 S. GARDENIA TERR
CITY-ST-ZIP CRYSTAL RIVER FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Brown, Dumas Jr., Chief

1-13-98

CR2E037 (10/97)