2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ~

FILED DOCUMENT # 768961 HART -Jan 28, 2000 8:00 am 1. Entity Name **Secretary of State** CRYSTAL RIVER FIRE DEPARTMENT, INC. 01-28-2000 90122 015 ****61.25 Principal Place of Business Mailing Address 123 NW HIGHWAY 19 123 NW HIGHWAY 19 CRYSTAL RIVER FL 34428 CRYSTAL RIVER FL 34428 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2536303 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) DUMAS, BROWN JR. 291 SOUTH GARDENIA TERRACE CRYSTAL RIVER FL 34423 Zip Code City FL 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. President X Change ☐ Addition CR2E037 (9/99 TITLE X Delete TITLE SKIDMORE, LARRY J., SR NAME Charles P. Kofmehl, Jr. NAME STREET ADDRESS STREET ADDRESS 715 NE 13TH STREET 513 NW 2nd Ave CITY-ST-ZIP CITY-ST-ZIP CRYSTAL RIVER FL Crystal River, ☐ Change ☐ Addition ☐ Delete TITLE TITLE D٧ NAME DAVIS, BILL NAME STREET ADDRESS STREET ADDRESS 6380 N. DIAMOND TERRACE CITY-ST-ZIP CITY-ST-ZIP CRYSTAL RIVER FL ☐ Change Addition ☐ Delete TITLE TITLE DVT DUMAS, JACK NAME NAME STREET ADDRESS STREET ADDRESS 419 NE CRYSTAL STREET CITY-ST-ZIP CITY-ST-ZIP CRYSTAL RIVER FL ☐ Change Addition DS ☐ Delete TITLE CATES, TERRY NAME STREET ADDRESS STREET ADDRESS 9415 W WISCONSIN CT. CITY-ST-ZIE CITY-ST-ZIP CRYSTAL RIVER FL ☐ Change ☐ Addition TITLE ☐ Delete DUMAS, BROWN MAME NAME STREET ADDRESS STREET ADDRESS 291 S. GARDENIA TERR CITY-ST-ZIP CITY-ST-ZIP CRYSTAL RIVER FL ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

DED Brown Dumas, Jr.

352-795-3451

1-26-00