

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 30, 2004 8:00 am
Secretary of State

07-30-2004 90005 048 ****70.00

DOCUMENT # 770653

1. Entity Name
**SUWANEE RANCHETTES VOLUNTEER FIRE
DEPARTMENT, INC.**



Principal Place of Business
**ROUTE 5, BOX 717-A
LAKE CITY, FL 32024 US**

Mailing Address
**PO BOX 342
BRANFORD, FL 32008 US**

44050753



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07202004

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-2879873

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**SAMPSON, MARIANNE
RT. 5, BOX 717
LAKE CITY, FL 32024**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete

NAME **SD**
BROOKS, JAKE
STREET ADDRESS **3562 230TH TERRACE**
CITY-ST-ZIP **LAKE CITY, FL 32024**

TITLE ☒ Delete

NAME **PD**
JOHANSEN, CARL
STREET ADDRESS **4373 288TH STREET**
CITY-ST-ZIP **BRANFORD, FL 32008**

TITLE ☐ Delete

NAME **TD**
PEGGY, TERRY
STREET ADDRESS **22019 29TH RD**
CITY-ST-ZIP **LAKE CITY, FL 32024**

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME **D**
BROOKS, JAKE
STREET ADDRESS **3562 230TH Ter.**
CITY-ST-ZIP **LAKE CITY, FL 32024**

TITLE ☐ Change ☒ Addition

NAME **PD**
BILL JACKSON
STREET ADDRESS **27441 37th Rd.**
CITY-ST-ZIP **BRANFORD, FL 32008**

TITLE ☒ Change ☐ Addition

NAME **STD**
Peggy Terry

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Peggy Terry

Peggy Terry

7/29/04

386-935-1427