


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 06, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 770653</b>	
1. Entity Name <b>SUWANEE RANCHETTES VOLUNTEER FIRE DEPARTMENT, INC.</b>	

Principal Place of Business <b>ROUTE 5, BOX 717-A LAKE CITY, FL 32024 US</b>	Mailing Address <b>PO BOX 342 BRANFORD, FL 32008 US</b>
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04012005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-2879873</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)  
Signature, typed or printed name of registered agent and title if applicable DATE

<b>Filing Fee is \$61.25 Due by May 1, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROOKS, JAKE 3562 230TH TERRACE LAKE CITY, FL 32024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JACKSON, BILL 27441 37TH RD BRANFORD, FL 32008
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STDF TERRY, PEGGY 22019 29TH RD LAKE CITY, FL 32024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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04/06/05-80053-020 70.00

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: Peggy Terry PEGGY Terry 4/1/05 386-935-1427  
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #