

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 29, 2006 08:00 AM**  
**Secretary of State**

**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



01172006 No Chg-NP

CRZE037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

59-2879873

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

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

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 May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution

☐

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

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1100000483492  
04/12/06 00001 001 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/06

Date

386-935-1427

Daytime Phone