

N000000001527

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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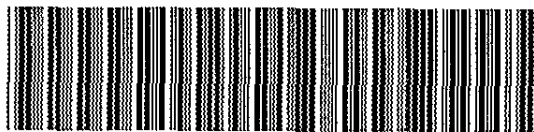
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: DOG ISLAND VOLUNTEER FIRE DEPARTMENT, INC.  
(Name of corporation)

DOCUMENT NUMBER: N00000001527

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RICHARD L VOSE

(Name of person)

DOG ISLAND VOLUNTEER FIRE DEPARTMENT INC.

(Name of firm/company)

HC 63 BOX <sup>5010</sup> ~~5010~~ DOG ISLAND,

(Address)

CARRABELLE FL 32322

(City/state and zip code)

For further information concerning this matter, please call:

RICHARD VOSE

(Name of person)

850 697-4764

at (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: DOG ISLAND VOLUNTEER FIRE DEPARTMENT INC.
2. The principal office address: HC 63 BOX 5020, DOG ISLAND  
CARRABELLE FL 32322
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 03-2-2000 Document number: N00000001527
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  
J BECKER BOATENREITER  
537 GULF SHORE Dr. DOG ISLAND FL 32322

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

MR RICHARD VOSE  
914 GULF SHORE DRIVE, DOG ISLAND FL 32322  
(P.O. Box or personal mailbox NOT acceptable)

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**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

*Susan Backerman*  
(Signature of an officer or director)

SUSAN BACKERMAN, SECRETARY  
(Printed or typed name and title) DIRECTOR

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

*Richard L Vose*  
(Signature of Registered Agent)

Nov 19, 2003  
(Date)

If signing on behalf of an entity:

RICHARD VOSE

(Typed or Printed Name)

INTERIM FIRE CHIEF, DIRECTOR

(Capacity)

**\*\*\* FILING FEE: \$35.00 \*\*\***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327 TALLAHASSEE, FL 32314