

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 07, 2004 8:00 am
Secretary of State

04-07-2004 90048 024 ****61.25

DOCUMENT # N00000003708

1. Entity Name

FLORIDA EXEVUTIVE FIRE OFFICERS' ASSOCIATION,
INC.



Principal Place of Business

57 HAMPTON CIRCLE
NICEVILLE FL 32578

Mailing Address

57 HAMPTON CIRCLE
NICEVILLE FL 32578

54028027

2. Principal Place of Business

2515 55 AVE. E.

3. Mailing Address

2515 55 AVE. E.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



MOORE

CR2E037 (11/03)

City & State

BRADENTON FL

City & State

BRADENTON FL

4. FEI Number

59-3521170

Applied For

Not Applicable

Zip

Country

MANATEE

Zip

Country

MANATEE

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JORDAN, GARY D
57 HAMPTON CIRCLE
NICEVILLE FL 32578

7. Name and Address of New Registered Agent

Name

JAMES T. STEFFENS

Street Address (P.O. Box Number is Not Acceptable)

2515 55 AVENUE EAST

City

BRADENTON

FL

Zip Code

34203

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

FILE NOW: FEE IS \$61.25
Due By May 1, 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
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
JORDAN, GARY D
57 HAMPTON CIRCLE
NICEVILLE FL 32578 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
O'NEAL, DERRYL B
36848 CHANCEY ROAD
ZEPHYRHILLS FL 33541 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
STEFFENS, JAMES T
2515 55TH AVENUE EAST
BRADENTON FL 34203 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VICE CHAIR ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
RICHARD WILLIAMS, CHAIR ☒ Change ☐ Addition
PO BOX 490-34
GAINESVILLE, FL 32602-0490

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SECRETARY/TREASURER ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

JAMES T. STEFFENS

April 3, '04

941.753.4870

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #