

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008 08:00 AM
Secretary of State

DOCUMENT # N02000000836

1. Entity Name
RED HOT FIRE INC.



Principal Place of Business

31512 GLADY LANE
TAVERES, FL 32778

Mailing Address

17 CACTUS CIR N
WINTER HAVEN, FL 33880



04142008 No Chg-NP

CR2E037 (4/06)

4. FEI Number
01-0603082

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LAMONS, JULIETA A
17 CACTUS CIR N
WINTER HAVEN, FL 33880

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, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000906839

05/05/08 00014-013 61.25

10. OFFICERS AND DIRECTORS

TITLE D
NAME LAMONS, JULIETA A
STREET ADDRESS 17 CACTUS CIR N
CITY-ST-ZIP WINTER HAVEN, FL 33880

TITLE D
NAME LAMONS, STEVEN E
STREET ADDRESS 17 CACTUS CIR N
CITY-ST-ZIP WINTER HAVEN, FL 33880

TITLE D
NAME GREER, GARY L
STREET ADDRESS 10509 GOOSE PRAIRIE RD
CITY-ST-ZIP LEESBURG, FL 34788

TITLE D
NAME HENDERSON, KEN
STREET ADDRESS 15422 CARROLLS CT.
CITY-ST-ZIP TAVARES, FL 32778

TITLE D
NAME CISLAK, LUCY
STREET ADDRESS 214 HEDDON RD.
CITY-ST-ZIP MURPHY, NC 28906

TITLE D
NAME CISLAK, PAUL
STREET ADDRESS 214 HEDDON RD
CITY-ST-ZIP MURPHY, NC 28906

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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:

Julieta A. Lamons

April 14/08

(863) 293-9490

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #