

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2006 8:00 am
Secretary of State

03-23-2006 90004 035 ****70.00

DOCUMENT # N03000001768					
1. Entity Name SOUTHERN MANATEE VOLUNTEER FIREFIGHTERS ASSOCIATION, INC.					
Principal Place of Business 1640 60 AVE DRIVE E BRADENTON, FL 34203			Mailing Address 1640 60 AVE DRIVE E BRADENTON, FL 34203		
2. Principal Place of Business 2451 Trailmate Dr.		3. Mailing Address 2451 Trailmate Dr.		<div style="font-size: 24px; font-weight: bold; margin-bottom: 10px;">40036990</div> <div style="margin-top: 10px;"> 02272006 Chg-NP CR2E037 (11/05) </div>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Sarasota, FL		City & State Bradenton, FL			
Zip Country 34243 US		Zip Country 34204 US			
4. FEI Number 65-0575108				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HENNESSY, THOMAS F 1640 60 AVE DRIVE E BRADENTON, FL 34203			7. Name and Address of New Registered Agent Name: <u>Hennessy, Thomas F.</u> Street Address (P.O. Box Number is Not Acceptable): 2451 Trailmate Dr. E. City: <u>Sarasota</u> FL Zip Code: <u>34243</u>		
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. <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;"> SIGNATURE: <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> </div> <div style="width: 20%; text-align: right;"> DATE: <u>3/20/06</u> </div> </div>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PERRY, ADAM 1640 60TH AVE. DRIVE E. BRADENTON, FL 34203	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	2451 Trailmate Dr. Sarasota, FL 34243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FOSS, DEREK 1640 60TH AVE. DRIVE E BRADENTON, FL 34203	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Sigfrid, Eric 2451 Trailmate Dr. Sarasota, FL 34243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DEHART, JEREK 1640 60TH AVE. DRIVE E. BRADENTON, FL 34203	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Kevsch, Timothy 2451 Trailmate Dr. Sarasota, FL 34243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SNIDER, CHRIS 1640 60TH AVE. DRIVE E. BRADENTON, FL 34203	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Lear, Tary 2451 Trailmate Dr. Sarasota, FL 34243
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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:				3/20/06 941-751-7675	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>Date Daytime Phone #</small>	