

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000002188

**FILED**  
**Apr 19, 2010**  
**Secretary of State**

**Entity Name:** ORANGE CITY FIRE DEPARTMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

215 N. HOLLY AVE.  
ORANGE CITY, FL 32763

**New Principal Place of Business:**

**Current Mailing Address:**

944 SYLVA AVE.  
ORANGE CITY, FL 32763

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SIEVERT, SUSAN M  
944 SYLVA AVE  
ORANGE CITY, FL 32763 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SMITH, CHARLES R  
Address: 580 HEATHER LANE  
City-St-Zip: ORANGE CITY, FL 32763

Title: VP  
Name: CREWS, THOMAS W  
Address: 2401 GREENHEDGE RD  
City-St-Zip: ORAGNE CITY, FL 32763

Title: S  
Name: SIEVERT, SUSAN M  
Address: 944 SYLVA AVE.  
City-St-Zip: ORANGE CITY, FL 32763

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** SUSAN SIEVERT

SEC

04/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date