

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N04000004315

**FILED**  
**Nov 16, 2011**  
**Secretary of State**

**Entity Name:** FLAGLER COUNTY PROFESSIONAL FIREFIGHTERS ASSOCIATION, INC.

**Current Principal Place of Business:**

130 AIRPORT RD.  
BUNNELL, FL 32110

**New Principal Place of Business:**

207 N. MOORE ST  
BUNNELL, FL 32110

**Current Mailing Address:**

P.O. BOX 1904  
BUNNELL, FL 32110

**New Mailing Address:**

**FEI Number:** 56-2437107

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WARING, JAMES P  
9 RYBERRY PL  
PALM COAST, FL 32164 US

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

PALMER, STEPHEN D  
32 ROLLING SANDS DR  
PALM COAST, FL 32164 US

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: STEPHEN D. PALMER

11/16/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SEC  
Name: PALMER, STEPHEN D  
Address: 32 ROLLING SANDS DR  
City-St-Zip: PALM COAST, FL 32164

Title: PRES  
Name: BENNETT, RICHARD M  
Address: 207 N. MOORE ST  
City-St-Zip: BUNNELL, FL 32110

Title: VP  
Name: LONGO, ROY  
Address: 327 NORTH YOUNGE ST  
City-St-Zip: ORMOND BEACH, FL 32174

Title: TRES  
Name: KING, CODY  
Address: 12 RYECROFT LN  
City-St-Zip: PALM COAST, FL 32174

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: STEPHEN D. PALMER

SEC

11/16/2011

Electronic Signature of Signing Officer or Director

Date