

ANNUAL REPORT

FILED
Jul 21, 2005 8:00 am
Secretary of State

07-21-2005 90032 024 ****70.00

DOCUMENT # N04000005188

1. Entity Name
BEULAH FIREFIGHTERS COMMUNITY IMPROVEMENT ASSOCIATION, INC.



Principal Place of Business
**6400 WEST NINE MILE ROAD
 PENSACOLA, FL 32526**

Mailing Address
**6400 WEST NINE MILE ROAD
 PENSACOLA, FL 32526**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07142005

Chg-NP

CR2E037 (10/03)

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RODRIQUE, GREGORY S
 6400 WEST NINE MILE ROAD
 PENSACOLA, FL 32526**

Name

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

City

FL

Zip Code

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 September 7, 2005**

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 D ☐ Delete
 NAME MCNAIR, STEPHEN T
 STREET ADDRESS 6230 WEST NINE MILE ROAD
 CITY-ST-ZIP PENSACOLA, FL 32526

TITLE D ☐ Delete
 NAME PRICE, GAVIN F II
 STREET ADDRESS 8716 REBEL ROAD
 CITY-ST-ZIP PENSACOLA, FL 32526

TITLE D ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☐ Addition

NAME STREET ADDRESS CITY - ST - ZIP	FRITZ, F.R. 7910 THOMLEY TRAIL PENSACOLA, FL 32526	NAME STREET ADDRESS CITY - ST - ZIP	ATTACHMENT
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D RODRIQUE, GREGORY S 8775 REBEL ROAD PENSACOLA, FL 32526	TITLE NAME STREET ADDRESS CITY - ST - ZIP	# NO# 000003188 50056827
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 life empowered.

SIGNATURE:

Gregory S. Rodrigue