

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008618

FILED
Mar 15, 2007
Secretary of State

Entity Name: PROFESSIONAL FIREFIGHTERS OF MARATHON, INC.

Current Principal Place of Business:

P O BOX 500676
MARATHON, FL 33050

New Principal Place of Business:

8900 O/S HWY
MARATHON, FL 33050

Current Mailing Address:

P O BOX 500676
MARATHON, FL 33050

New Mailing Address:

FEI Number: 34-2011430

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FORCINE, JOSEPH
43 JEW FISH AVENUE
KEY LARGO, FL 33037 US

Name and Address of New Registered Agent:

FORCINE, JOSEPH
610 85TH STREET OCEAN
MARATHON, FL 33050 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:

03/15/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MALMQUIST, JIM
Address: P O BOX 500676
City-St-Zip: MARATHON, FL 33050

Title: S,T () Delete
Name: ABAD, ROBERT
Address: P O BOX 500676
City-St-Zip: MARATHON, FL 33050

Title: P () Delete
Name: FORCINE, JOSEPH
Address: P O BOX 500676
City-St-Zip: MARATHON, FL 33050

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S,T (X) Change () Addition
Name: BOHNEN, LAWRENCE J
Address: 2811 GROUPE DR
City-St-Zip: MARATHON, FL 33050

Title: P (X) Change () Addition
Name: FORCINE, JOSEPH
Address: 610 85TH STREET OCEAN
City-St-Zip: MARATHON, FL 33050

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LAWRENCE J. BOHNEN

S.T.

03/15/2007

Electronic Signature of Signing Officer or Director

Date