

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04309

FILED  
Apr 30, 2010  
Secretary of State

**Entity Name:** ESCAMBIA COUNTY VOLUNTEER FIREMENS ASSOCIATION, INC.

**Current Principal Place of Business:**

6400 WEST NINE MILE ROAD  
PENSACOLA, FL 32526 US

**New Principal Place of Business:**

7209 LILLIAN HWY  
PENSACOLA, FL 32506 US

**Current Mailing Address:**

PO BOX 3914  
PENSACOLA, FL 32516 US

**New Mailing Address:**

7209 LILLIAN HWY  
PENSACOLA, FL 32506 US

FEI Number: 59-2084268

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WEAVER, MARY D  
7209 LILLIAN HWY  
PENSACOLA, FL 32506 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: PRES  
Name: GILMORE, ERIC  
Address: 7209 LILLIAN HWY  
City-St-Zip: PENSACOLA, FL 32506 US

Title: 1VP  
Name: MCNAIR, STEVE  
Address: 6400 WEST NINE MILE ROAD  
City-St-Zip: PENSACOLA, FL 32526 US

Title: 2VP  
Name: AARON, MICHAEL  
Address: 6400 WEST NINE MILE ROAD  
City-St-Zip: PENSACOLA, FL 32514 US

Title: SEC  
Name: WEAVER, MARY  
Address: 7209 LILLIAN HWY  
City-St-Zip: PENSACOLA, FL 32506 US

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: MARY WEAVER

SEC

04/30/2010

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

\_\_\_\_\_  
Date