

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

DOCUMENT# N05000002530

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** PINELLAS PARK FIREFIGHTERS ASSO. LOCAL 2193 INC.

**Current Principal Place of Business:**

5000 82 AVE. N.  
PINELLAS PARK, FL 33781 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 964  
PINELLAS PARK, FL 33781 US

**New Mailing Address:**

**FEI Number:** 23-7231059

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIAMS, BERT A  
5000 82 AVE. N.  
PINELLAS PARK, FL 33781 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: WILLIAMS, BERT  
Address: 6760 28TH AVE N  
City-St-Zip: SAINT PETERSBURG, FL 33710 US

Title: S/T  
Name: JACKSON, MICHAEL  
Address: 1801 63RD AVENUE S  
City-St-Zip: ST. PETERSBURG, FL 33712 US

Title: VP  
Name: DALLAM, WILLIAM  
Address: 6716 79TH AVENUE NORTH  
City-St-Zip: PINELLAS PARK, FL 33781 US

Title: VP  
Name: SCHLATTERER, BRETT B  
Address: 5241 DENVER STREET N.E.  
City-St-Zip: SAINT PETERSBURG, FL 33703 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: KATHLEEN A BELLAS

CPA

04/26/2010

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

\_\_\_\_\_  
Date