2002 UNIFORM BUSINESS REPORT (UBR) FILED Feb 25, 2002 8:00 am Secretary of State **DOCUMENT # N05388** 1. Entity Name LAKE TALQUIN VOLUNTEER FIRE DEPARTMENT, INC. 02-25-2002 90571 038 ****70.00 Principal Place of Business Mailing Address 16500 BLOUNTSTOWN HWY 16500 BLOUNTSTOWN HWY TALLAHASSEE FL 32310 TALLAHASSEE FL 32310 2. Principal Place of Business 3. Mailing Address 6500 Blountstow 6500 DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 1191 59-2916646 Not Applicable \$8.75 Additional 32310 ٧٧ 5. Certificate of Status Desired 3/0 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) HARVEY, KENNETH R. 16919 BLOUNTSTOWN HWY TALLAHASSEE FL 32310 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. Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** THE PERSON TO BE HELD AND THE WIND THE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE □ Delete TITLE ☐ Change Addition HARVEY, CARMA NAME NAME STREET ADDRESS 16919 BLOUNTSTOWN HWY STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TALLAHASSEE FL 32310 RePert HANK-Klant 🗷 Delete TITLE Change ☐ Addition 18123 Bloundstown Huy NAME KNIGHT, HANK STREET ADDRESS **402 WILKENSON ST** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32310 TITLE D ☐ Delete TITLE Change ☐ Addition NAME MILLR, MARK NAME STREET ADDRESS STREET ADDRESS 301 WILKENSON ST CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32310 Tony Belmont 18801 Forest manor RD TITLE Delete TITLE Change ■ Addition NAME CHAMBERS, SUSAN NAME STREET ADDRESS STREET ADDRESS 16411 BLOUTSTOWN HWY 323/0 CITY-ST-ZIF CITY-ST-ZIP TALLAHASSEE FL 32310 TITLE Delete TITLE Change NAME OUZTS, RANDY NAME STREET ADDRESS STREET ADDRESS 16500 HIGHWAY 20 WEST CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32310 TITLE ☐ Delete TITLE Addition NAME HARVEY, KENNETH NAME STREET ADDRESS. 16919 BLOUNTSTOWN HWY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>TALLAHASSEE FL 32310</u> 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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR