2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N05580

1. Entity Name



FILED Jan 10, 2003 8:00 am Secretary of State 01-10-2003 90062 042 ****61.25

CANTONMENT VOLUNTEER FIRE DEPARTMENT, INC.								
Principal Place of Business 2 WOODLAND AVENUE CANTONMENT FL 32533		Mailing Address 2 WOODLAND AVENUE CANTONMENT FL 32533						
2. Principal P	Place of Business	3. Mailing Address						
	<u>.</u>	_						
Suite, Apt.	#, etc.	Suite, Apt. #, etc			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number N	OT APPLICABLE	⊢	oplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of S	tatus Desired	\$8.75 Add	
	6. Name and Address of Current	Registered Agent			7. Name and Address of New Registered Agent			
LÖT 5	DAVID E TOP LANE MENT FL 32533		Street Ac	ddress (F	NNETH 20. Box Number is I	Lane	Zip Cod	e 2
the obligat	e named entity submits this statement for items of registered agent. Signature, typed or printed name of registered agent. FILE NOW: FEE IS \$61.25	RU (Kerneth C and title if applicable. (NOTE:	FeW) Registered Agent signature paign Financing	Pres	idenT	//7	o3 eck Payable	to
10.	OFFICERS AND DII	PECTORS	11.	^	DOITIONS (CHANG	ES TO OFFICERS AND	DIDECTORS IN	110
TITLE NAME	PD JORDAN, DAVID	Delete	T	20			Change	Addition
STREET ADDRESS	1032 PINE TOP LANE LOT 5 CANTONMENT FL 32533		STREET ADDRESS CITY-ST-ZIP	59	CEDAR +	reth Rec Lane FL 32533		;
TITLE	VP			CAN	JONAWI	<u>/c 32 33 </u>	Channe Channe	()
NAME	BURKEME, DUSTY P.O BOX 249 CANTONMENT FL 32560	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition (
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WILLIS, KELLI 102 VAUGHN AVENUE CANTONMENT FL 32533	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MARTIN, ANDY 133 HARVEST HILL DR	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	:			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARTER, LARRY 19 COTTAGE HILL ROAD CANTONMENT FL 32533	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP	CB PICKENS, LLOYD 109 HARVEST HILL DR. CANTONMENT FL 32533 Pertify that the information supplied with	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ad in Sec	etion 119 (7/(3)/i) Fi	vida Statutes I further	Certify that the in	Addition

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: __\

Kanneth (CO Dellu (Kineth c Feb ()

850-968-7529