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Feb 18 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N06089 (9) 1. Corporation Name STATION 13 VOLUNTEER FIRE DEPARTMENT, INC. BREVARD COUNTY VOLUNTEER FIRE DEPARTMENT, STA. 22, INC.			
Principal Place of Business C/O CHIP SHEARER 2280 COLUMBIA BLVD. TITUSVILLE FL 32780-7032 US		Mailing Address C/O CHIP SHEARER 2280 COLUMBIA BLVD. TITUSVILLE FL 32780-7032 US	
2. Principal Place of Business 21 C/O LEN BEAM Suite, Apt. #, etc. 22 2280 COLUMBIA BLVD. City & State 23 TITUSVILLE, FL Zip 24 32780-7032		2a. Mailing Address 26 C/O LEN BEAM Suite, Apt. #, etc. 27 P.O. BOX 2288 City & State 28 TITUSVILLE, FL Zip 29 32781-2288 Country 30 USA	
3. Date Incorporated or Qualified 11/09/1984		3a. Date of Last Report 03/14/1996	
4. FEI Number 59-3038921		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			
9. Name and Address of Current Registered Agent DRAUS, JAMES 4200 HEMLOCK LN TITUSVILLE FL 32780		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D NAME SHEARER, CHIP STREET ADDRESS 4848 SEATTLE ST CITY-ST-ZIP COCOA FL	☒ DELETE	1.1 TITLE D 1.2 NAME LEN BEAM 1.3 STREET ADDRESS 2240 TALMAGE DR. 1.4 CITY-ST-ZIP TITUSVILLE, FL 32780	☒ Change ☐ Addition
TITLE D NAME BEAM, LEN STREET ADDRESS 1765 BIMINI ST CITY-ST-ZIP TITUSVILLE FL	☐ DELETE	2.1 TITLE D 2.2 NAME KEN POTTER 2.3 STREET ADDRESS 1035 HARRISON ST. 2.4 CITY-ST-ZIP TITUSVILLE, FL 32780	☐ Change ☒ Addition
TITLE D NAME DRAUS, JAMES STREET ADDRESS 4200 HEMLOCK LN CITY-ST-ZIP TITUSVILLE FL	☐ DELETE	3.1 TITLE D 3.2 NAME DRAUS, JAMES 3.3 STREET ADDRESS 4200 HEMLOCK LN 3.4 CITY-ST-ZIP TITUSVILLE FL	☐ Change ☐ Addition
TITLE D NAME DRAUS, JAMES STREET ADDRESS 4200 HEMLOCK LN CITY-ST-ZIP TITUSVILLE FL	☐ DELETE	4.1 TITLE D 4.2 NAME DRAUS, JAMES 4.3 STREET ADDRESS 4200 HEMLOCK LN 4.4 CITY-ST-ZIP TITUSVILLE FL	☐ Change ☐ Addition
TITLE D NAME DRAUS, JAMES STREET ADDRESS 4200 HEMLOCK LN CITY-ST-ZIP TITUSVILLE FL	☐ DELETE	5.1 TITLE D 5.2 NAME DRAUS, JAMES 5.3 STREET ADDRESS 4200 HEMLOCK LN 5.4 CITY-ST-ZIP TITUSVILLE FL	☐ Change ☐ Addition
TITLE D NAME DRAUS, JAMES STREET ADDRESS 4200 HEMLOCK LN CITY-ST-ZIP TITUSVILLE FL	☐ DELETE	6.1 TITLE D 6.2 NAME DRAUS, JAMES 6.3 STREET ADDRESS 4200 HEMLOCK LN 6.4 CITY-ST-ZIP TITUSVILLE FL	☐ Change ☐ Addition



CR2E037 (9/96)

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *James C. Draus* JAMES C. DRAUS 2/10/97