

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06089

FILED
Apr 30, 2007
Secretary of State

Entity Name: "BREVARD COUNTY VOLUNTEER FIRE DEPARTMENT, STA. 24, INC."

Current Principal Place of Business:

C/O ALAN OLDEN
2280 COLUMBIA BLVD.
TITUSVILLE, FL 327807032 US

New Principal Place of Business:

Current Mailing Address:

C/O ALAN OLDEN
P O BOX 2288
TITUSVILLE, FL 327812288 US

New Mailing Address:

FEI Number: 59-3038921

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OLDEN, ALAN G
7595 TURKEY POINT DRIVE
TITUSVILLE, FL 327807550 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: D () Delete
Name: DRAUS, JAMES
Address: 4200 HEMLOCK LANE
City-St-Zip: TITUSVILLE, FL 32780 US

Title: DTS (X) Delete
Name: OLDEN, ALAN G
Address: 7595 TURKEY POINT DRIVE
City-St-Zip: TITUSVILLE, FL 32780 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DTS (X) Change () Addition
Name: OLDEN, ALAN G
Address: 7595 TURKEY POINT DRIVE
City-St-Zip: TITUSVILLE, FL 32780 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALAN G. OLDEN

DTS

04/30/2007

Electronic Signature of Signing Officer or Director

Date