# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000000543

FILED Apr 21, 2008 Secretary of State

Entity Name: SOUTHWEST FLORIDA URBAN SEARCH AND RESCUE, FLORIDA TASK FORCE 6, INC.

Current Principal Place of Business: New Principal Place of Business:

% BONITA SPRINGS FIRE CTRL & RESCUE DIST 27701 BONITA GRANDE DR BONITA SPRINGS, FL 34135

Current Mailing Address: New Mailing Address:

% BONITA SPRINGS FIRE CTRL & RESCUE DIST 27701 BONITA GRANDE DR BONITA SPRINGS, FL 34135

FEI Number: 20-8650716 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PRINGLE, RICHARD W 2125 FIRST ST STE 200 FT MYERS, FL 33901 US

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:

OKL.

### Electronic Signature of Registered Agent

### Date

#### **OFFICERS AND DIRECTORS:**

#### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC ( ) Delete Title: PC (X) Change ( ) Addition
Name: WILSON, JOHN Name: LOMBARDO, WILLIAM B

Address: % EMS OF LEE COUNTY - P O BOX 398 Address: %S TRAIL FP&RSD - 5531 HALIFAX AVE

City-St-Zip: FT MYERS, FL 339020398 City-St-Zip: FT MYERS, FL 33912

 $\label{eq:title:equation:title: VC (X) Change () Addition} \end{minipage} Title: VC (X) Change () Addition$ 

Name: GOURLEY, DAN Name: IPPOLITO, NATALE J

Address: % BONITA SPRINGS FC-27701 BONITA GRANDE DR Address: % SAN CARLOS FD 19591 BEN HILL GRIFFIN PKW

City-St-Zip: BONITA SPRINGS, FL 34135 City-St-Zip: FORT MYERS, FL 33193

Title: TD ( ) Delete Title: SD (X) Change ( ) Addition

Name: PAXSON, CLIFFORD H Name: WILSON, JOHN

Address: %S TRAIL FP&RSD - 5531 HALIFAX AVE Address: % EMS OF LEE COUNTY - PO BOX 398

City-St-Zip: FT MYERS, FL 33912 City-St-Zip: FT MYERS, FL 339020398

 $\label{eq:definition} {\sf Title:} \qquad {\sf D} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

Name: LINDSEY, JEFF Name: KINSEY, PHIL

Address: % ESTERO FIRE RESCUE - 21500 3 OAKS PKWY Address: % BONITA SPRINGS FC-27701 BONITA GRANDE DR

City-St-Zip: ESTERO, FL 33928 City-St-Zip: BONITA SPRINGS, FL 34135

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BECKER, MICHAEL
 Name:

 Address:
 % FT MYERS BCH FC DIST - 3043 ESTERO BLVD
 Address:

 City-St-Zip:
 FT MYERS BEACH, FL 33931
 City-St-Zip:

Title: D ( ) Delete Title: TD (X) Change ( ) Addition

Name: ELLIOTT, WILLOAM Name: ELLIOTT, WILLIAM

Address: %IONA MCGREGOR FPRS - 6061 S POINTE BLVD Address: %IONA MCGREGOR FPRS - 6061 S POINTE BLVD

City-St-Zip: FT MYERS, FL 33919 City-St-Zip: FT MYERS, FL 33919

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: WILLIAM B LOMBARDO PC 04/21/2008