

**2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Dec 08, 2008**  
**Secretary of State**

DOCUMENT# N07000005655

**Entity Name:** FLAGLER EMERGENCY SERVICE VOLUNTEERS, INC.**Current Principal Place of Business:**73 WOOD CEDAR DR  
PALM COAST, FL 32164**New Principal Place of Business:****Current Mailing Address:**P O BOX 1545  
BUNNELL, FL 32110**New Mailing Address:**P O BOX 353236  
PALM COAST, FL 32135**FEI Number:** 26-0437447**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**RICHARD, LINDA M  
6755 COUNTY ROAD 305  
BUNNELL, FL 32110 US**Name and Address of New Registered Agent:**RIPLEY, STEVEN M  
118 BURROUGHS DRIVE  
PALM COAST, FL 32137 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: STEVEN M. RIPLEY

12/08/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: RICHARD, LINDA  
Address: 6755 COUNTY ROAD 305  
City-St-Zip: BUNNELL, FL 32110

Title: T ( ) Delete  
Name: HEYWOOD, DOUGLAS R  
Address: 73 WOOD CEDAR DR  
City-St-Zip: PALM COAST, FL 32164

Title: P ( ) Delete  
Name: MUSIKAR, MERRILL  
Address: 75 FLORIDA PARK DRIVE  
City-St-Zip: PALM COAST, FL 32137

Title: VP ( ) Delete  
Name: ALEX, ROBERT  
Address: 71 WESTCHESTER LANE  
City-St-Zip: PALM COAST, FL 32164

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

Title: S (X) Change ( ) Addition  
Name: RIPLEY, STEVEN M  
Address: 118 BURROUGHS DRIVE  
City-St-Zip: PALM COAST, FL 32137

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

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

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: STEVEN M. RIPLEY

S

12/08/2008

Electronic Signature of Signing Officer or Director

Date