

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000011304

FILED
Apr 19, 2009
Secretary of State

Entity Name: CAPE CORAL FIREFIGHTERS BUILDING CORPORATION, INC.

Current Principal Place of Business:

6696 WILLOW LAKE CIRCLE
FORT MYERS, FL 33966

New Principal Place of Business:

407 SW 2ND TER
CAPE CORAL, FL 33991 US

Current Mailing Address:

6696 WILLOW LAKE CIRCLE
FORT MYERS, FL 33966

New Mailing Address:

407 SW 2ND TER
CAPE CORAL, FL 33991 US

FEI Number: 26-3827147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUERTH, MARK C
6696 WILLOW LAKE CIRCLE
FORT MYERS, FL 33966 US

Name and Address of New Registered Agent:

CAPE CORAL PROFESSIONAL FIREFIGHTERS
407 SW 2ND TER
CAPE CORAL, FL 33991 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: LARRIE L. HEDRICK

04/19/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MUERTH, MARK C
Address: 6696 WILLOW LAKE CIRCLE
City-St-Zip: FORT MYERS, FL 33966

Title: D () Delete
Name: HAWKINS, ERIC
Address: PO BOX 152330
City-St-Zip: CAPE CORAL, FL 339152330

Title: D () Delete
Name: HUFFMAN, JASON L
Address: PO BOX 152330
City-St-Zip: CAPE CORAL, FL 339152330

Title: D () Delete
Name: HEDRICK, LARRIE L
Address: PO BOX 152330
City-St-Zip: CAPE CORAL, FL 339152330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MUERTH, MARK C
Address: 407 SW 2ND TER
City-St-Zip: CAPE CORAL, FL 33991 US

Title: VP (X) Change () Addition
Name: HAWKINS, ERIC D
Address: 407 SW 2ND TER
City-St-Zip: CAPE CORAL, FL 33991 US

Title: SEC (X) Change () Addition
Name: HUFFMAN, JASON L
Address: 407 SW 2ND TER
City-St-Zip: CAPE CORAL, FL 33991 US

Title: TRES (X) Change () Addition
Name: HEDRICK, LARRIE L
Address: 407 SW 2ND TER
City-St-Zip: CAPE CORAL, FL 33991 US

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: LARRIE L. HEDRICK

TRES

04/19/2009

Electronic Signature of Signing Officer or Director

Date