

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09688

FILED
Jun 26, 2009
Secretary of State

Entity Name: RURAL DISTRICT NO. 4 VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:

9990 SW 63RD LN
CEDAR KEY, FL 32625 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 70
CEDAR KEY, FL 32625 US

New Mailing Address:

FEI Number: 59-0007171 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

THOMPSON, CHRISTY
6350 SW 95TH AVE
CEDAR KEY, FL 32625 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: VP () Delete
Name: WILKERSON, GERALD
Address: SW 103RD TERR
City-St-Zip: CEDAR KEY, FL 32625

Title: D () Delete
Name: HATHCOX, JOE
Address: 12350 SW 70TH ST.
City-St-Zip: CEDAR KEY, FL 32625

Title: PST () Delete
Name: THOMPSON, CHRISTY
Address: 6350 SW 95TH AVE
City-St-Zip: CEDAR KEY, FL 32625

Title: D () Delete
Name: MERCER, NATHAN
Address: 6491 SW SR 24
City-St-Zip: CEDAR KEY, FL 32625

Title: C () Delete
Name: HATHCOX, CLIFFORD
Address: 7031 SW 122ND CT.
City-St-Zip: CEDAR KEY, FL 32625

Title: D () Delete
Name: STEFANI, JACLYN
Address: 10050 SW 42ND PL
City-St-Zip: CEDAR KEY, FL 32625

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: HATHCOX, PATRICK
Address: 6350 SW 123RD TERR
City-St-Zip: CEDAR KEY, FL 32625

Title: D (X) Change () Addition
Name: SHEWEY, CHARLES T
Address: 6280 SW ST. RD. 24
City-St-Zip: CEDAR KEY, FL 32625

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: CHRISTY THOMPSON

PST

06/26/2009

Electronic Signature of Signing Officer or Director

Date