# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# N17587**

**Entity Name:** ST. PETERSBURG FIRE FIGHTERS ASSOCIATION, INC.

| **Current Principal Place of Business:** | **New Principal Place of Business:** |
|---|---|
| PRESIDENT<br>5240 1ST AVE NO<br>ST. PETERSBURG, FL 33710    US | |

| **Current Mailing Address:** | **New Mailing Address:** |
|---|---|
| PO BOX 14492<br>SAINT PETERSBURG, FL 33732    US | |

FEI Number: 59-2743167        FEI Number Applied For ( )        FEI Number Not Applicable ( )        Certificate of Status Desired (X)

| **Name and Address of Current Registered Agent:** | **Name and Address of New Registered Agent:** |
|---|---|
| NEWTON, WINTHROP<br>104 KINGSTON ST. SO.<br>SAINT PETERSBURG, FL 33711    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: _____

Electronic Signature of Registered Agent                                          Date

## OFFICERS AND DIRECTORS:

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

| | | | | |
|---|---|---|---|---|
| Title: | PD         ( ) Delete | Title: | | ( ) Change ( ) Addition |
| Name: | NEWTON, WINTHROP M | Name: | | |
| Address: | PO BOX 15514 | Address: | | |
| City-St-Zip: | SAINT PETERSBURG, FL 33733 FL | City-St-Zip: | | |
| | | | | |
| Title: | STD        ( ) Delete | Title: | | ( ) Change ( ) Addition |
| Name: | MOTT, WILLIAM G | Name: | | |
| Address: | 12105 73 ST N | Address: | | |
| City-St-Zip: | LARGO, FL 33773 FL | City-St-Zip: | | |
| | | | | |
| Title: | VD         ( ) Delete | Title: | | ( ) Change ( ) Addition |
| Name: | PAULEY, RICHARD E JR | Name: | | |
| Address: | 1344 GREAT OAK DR | Address: | | |
| City-St-Zip: | CLEARWATER, FL 33764 | 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:   WILLIAM G. MOTT                                STD                        02/15/2008

Electronic Signature of Signing Officer or Director                                          Date