## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

**NONPROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N19153

(8)

## YEEHAW JUNCTION VOLUNTEER FIRE DEPARTMENT, INC.

Principal Place of Business Mailing Address						1 100     101   101   101   101   101   101   101   101   101   101   101   101   101   101   101   101   101	1 10H 018H 110	III <b>8</b> 8881 81814 Q	1811 81811 1881	
3400 CENTRAL YEEHAW JUNC	TION	3400 CENTRAL BLVD YEEHAW JUNCTION				DO NOT WRITE IN THIS SPACE				
US US	FL 34972	OKEECHOBEE FL 34972 US				3. Date Incorporated or Qualified 02/10/1987	ified 3a. Date of Last Report 04/01/1996			
<del></del>	lace of Business	2a. Mailing Address	h			4. FEI Number			oplied For	
21 Suite, Apt.	# at-	26				59-2844131			ot Applicable	
22		Suite, Apt. #, etc.				5. Certificate of Status Desired		,	Additional equired	
City & Stat	е	City & State				6. Election Campaign Financing		\$5.00	May Be	
23			28			Trust Fund Contribution		Added	to Fees	
Zip	Country	Zip	Cou	ntry	ĺ	8. This corporation owes or has p				
24	25   29   30   9. Name and Address of Current Registered Agent				Personal Property Tax due June 30.					
		81 Name		10, Name and Address of New Ro	gistered	Agent	'			
						ER, SEAN			:	
BYARS, TOMMY 5625 CYPRESS DRIVE				<b>B2</b> Street	t Address	s (P.D. Box Number is Not Accepta	ble)			
		83	•02	BINE CLASS	RAN	ICH R	4			
OKEECH		03								
	•		İ	84 City	سرج (ر)	- // - 5	FL	85 Zip	Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered									ts registered	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's peard of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 6 7 5503, Florida Statutes.										
SIGNATURE SEAN D. MILLER Team 1). HITTER 7-25-97										
	Signature, typed or printed name of registered ac	pent and title if applicable (NO)		Agent signature	e required v	when reinstating)	DATE			
12.		ND DIRECTORS  M DELETE	13.		1	ADDITIONS/CHANGES TO OFFI				
	PD BYADO TOMAY	De ottere	1.1 T(T		50			Change	Addition	
NAME	BYARS, TOMMY		1,2 NA			Miller, SEAN	_		. :1	
STREET ADDRESS	5625 CYPRESS DRIVE			reet address		02 BLUE CYPRESS	Rano		' '	
CITY-ST-ZIP TITLE	OKEECHOBEE FL 34972	<b>▼</b> DELETE		Y-ST-ZIP		SE CHOBEE FL.	3497			
NAME	VP	D DELETE	2.1 TIT		VP.			Change .	☐ Addition	
	BAILEY, RAY		2.2 NA		Che:	Grape Ave 3530				
STREET ADDRESS	3575 MAGNOLIA DRIVE			REET ADDRESS			_			
CITY-ST-ZIP TITLE	OKEECHOBEE FL 34972	<b>▼</b> DELETE		TY-ST-ZIP		eechobee F1 3497	<u>z</u>	La Obsession	1 4 2 2 2 2 2 2	
NAME	* _	E DECENT	3.1 1(1		7	X.4 *		-Change	☐ Addition	
STREET ADDRESS	NOELS, CINDY 5680 FOREST DRIVE		3.2 NA	me Reet address	Kare	s State Pd 60E				
CITY-ST-ZIP	OKEECHOBEE FL 34972									
TITLE	S	DELETE	3.4. CI	TY-\$T-ZIP		uchober F1 34972	<del></del>	Change	Addition	
NAME	GRIFFIS, BONNY	te decent	4.1 III		<b>→</b>		•		☐ Addition	
STREET ADDRESS	**** ** ***				Dep	Ora Stoke				
CITY-ST-ZIP	5865 OLGER DR OKEECHOBEE FL		4.5 317	Y-ST-ZIP		RINE AVE.	1972			
TITLE	CD CD	<b>≥</b> DELETE	5.1 TIT		_	echobes Pl 3		Change	Addition	
NAME	BYARS, ANN	E	5.2 NA		CD	Les Brade		والتعالف	CJ AUGRION	
STREET ADDRESS	5625 CYPRESS DR			ML REET ADDRESS		key Bundrum 57	69		.	
CITY-ST-ZIP	OKEECHOBEE FL			Y-ST-ZIP		Uder the Puler	•		Ì	
TITLE	VILLOHOULG FL	DELETE	6.1 TIT		UK.	echabee F1 349	16	Change	Addition	
NAME			6.2 NA			20000022	:cas			
STREET ADDRESS				ME REET ADDRESS		20000226 -08/14/97010	12n1	a P		
CITY-ST-ZIP		,		Y+ST-7IP		***61.25	1. بار	~ ' <i>8</i>	112	

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is tide and accurate and that my 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 trusted empression wered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, by on an attachment with an address.

**FILED** 

Aug 12 1997 8:00am

Secretary of State