

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N20968

1. Entity Name

LAND O'LAKES VOLUNTEER FIRE DEPARTMENT INC.#2

Principal Place of Business

21709 HALE ROAD
LAND O LAKES FL 34639-0095
US

Mailing Address

P. O. BOX 95
LAND O LAKES FL 34639-0095
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2586827

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SANTANA ACCOUNTING SERVICES
3738 LAND O'LAKES BLVD.
SUITE 202
LAND O'LAKES FL 34639

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BYRNE, MICHAEL
4718 ALPINE ROAD
LAND O LAKES FL 34639 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
INGLES, MICHAEL V
24836 WILD FRONTIER DR
LAND O LAKES FL 34639 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
MCCORD, MARY ANN H
22620 GAGE LOOP #21
LAND O LAKES FL 34639 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DILLY, ANN M
5140 EAGLE ISLAND DR
LAND O LAKES FL 34639 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BENCHOFF, JOHN H
2727 W FLETCHER AVE., APT 236
TAMPA FL 33618 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MOORE, ERIC J
22051 YACHT CLUB TERRACE
LAND O LAKES FL 34639 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
INGLES, MICHAEL V
24836 WILD FRONTIER DRIVE
LAND O LAKES FL 34639 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
STRAUSS, BRENDA
22610 WILLOW LAKES DRIVE
LUTZ, FL 33549 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
KELCH, BRENDA
14027 BLUEGILL LANE
HUDSON FL 34669 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WRIGHT, DUANE
22146 ROSEWALL COURT
LAND O LAKES FL 34639 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S/T
DILLY, JEFFREY W
5140 EAGLE ISLAND DR
LAND O LAKES FL 34639 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE JEFFREY W DILLY S/T 8 APRIL 2001 83996-2610
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90054 018 ****61.25

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DO NOT WRITE IN THIS SPACE

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