

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21310

FILED
Feb 23, 2009
Secretary of State

Entity Name: MOSSY POND VOLUNTEER FIRE DEPT., INC.

Current Principal Place of Business:

7128 NW PORTER GRADE
ALTHA, FL 32421 US

New Principal Place of Business:

Current Mailing Address:

7128 NW PORTER GRADE
ALTHA, FL 32421 US

New Mailing Address:

FEI Number: 59-3360281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MYRHAMMAR, ROLF
7380 NW PORTER GRADE
ALTHA, FL 32421 US

Name and Address of New Registered Agent:

TRUAX JR., WILLIAM L
22295 N.W. LAKE MCKENZIE BLVD.
ALTHA, FL 32421 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: WILLIAM L. TRUAX JR.

02/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: MYRHAMMAR, ROLF
Address: 7380 N.W. PORTER GRADE
City-St-Zip: ALTHA, FL 32421

Title: D () Delete
Name: MAZZARESE, ANTHONY
Address: 3227 NW PAWNEE RD
City-St-Zip: FOUNTAIN, FL 32438

Title: D () Delete
Name: STRICKLAND, JEFF
Address: 22291 NW ISOLETTA RD
City-St-Zip: ALTHA, FL 32421

Title: D () Delete
Name: YAUDAS, GEORGIA
Address: 23044 LK MCKENZIE BLVD
City-St-Zip: ALTHA, FL 32421

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TRUAX JR., WILLIAM L
Address: 22295 N.W. LAKE MCKENZIE BLVD.
City-St-Zip: ALTHA, FL 32421

Title: VP (X) Change () Addition
Name: MAZZARESE, ANTHONY
Address: 3227 NW PAWNEE RD
City-St-Zip: FOUNTAIN, FL 32438

Title: D (X) Change () Addition
Name: TRUAX, CARA A
Address: 22295 N.W. LAKE MCKENZIE BLVD.
City-St-Zip: ALTHA, FL 32421

Title: D (X) Change () Addition
Name: ORTIZ, CARLOS
Address: 7778 N.W. MARTIN SOWELL RD.
City-St-Zip: ALTHA, FL 32421

Title: D () Change (X) Addition
Name: GRATZ, ANTHONY
Address: 23720 N.W. LAKE MCKENZIE BLVD
City-St-Zip: ALTHA, FL 32421

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 L. TRUAX JR.

P

02/23/2009

Electronic Signature of Signing Officer or Director

Date