

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N23244 (9)

1. Corporation Name

WAKULLA STATION VOLUNTEER FIRE DEPARTMENT, INC.

Principal Place of Business

Mailing Address

3083 SHADEVILLE HWY
CRAWFORDVILLE FL 32327
US

57 ASPEN COURT
CRAWFORDVILLE FL 32327
US



3. Date Incorporated or Qualified

10/30/1987

3a. Date of Last Report

04/25/1995

4. FEI Number

59-2859621

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

3083 Shaderville HWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Crawfordville, FL

Zip

Country

Zip

Country

24

25

29

32327

30

Wakulla

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JOY BOWMAN
57 ASPEN COURT
CRAWFORDVILLE FL 32327

81 Name

Dee Gauge

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

61 Pine LN

83

84 City

Crawfordville

FL

Zip Code

32327

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 board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Dee Gauge

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

(NOTE: Registered Agent signature required when reinstating)

400001342254

-03/13/96-0161404

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELET
D	GANNEY, JIMMY	77 SPRINGWOOD BLVD	CRAWFORDVILLE FL	<input checked="" type="checkbox"/>
D	GERRELL, JAMES	5 SUMMER LANE	CRAWFORDVILLE FL	<input checked="" type="checkbox"/>
T	GERRELL, EMILY	5 SUMMER LANE	CRAWFORDVILLE FL	<input checked="" type="checkbox"/>
P	TURNER, CHUCK	47 LESLIE ANN STREET	CRAWFORDVILLE FL	<input type="checkbox"/>
D	WILLIAMS, JOE	43 MT ZION ROAD	CRAWFORDVILLE FL	<input checked="" type="checkbox"/>
S	JOY BOWMAN	57 ASPEN COURT	CRAWFORDVILLE FL	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
President	Scott Causey	Cortney LN	Crawfordville, FL 32327	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	Change	Addition
Secretary	Dee Gauge	61 PINE LANE	Crawfordville, FL 32327	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	Change	Addition
2 yr Dir	Paul Ginka	35 Rose Wood Rd	Crawfordville, FL 32327	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	Change	Addition
Treas.	Rachelle Coleman	171 Lake Ellen Shore Dr	Crawfordville, FL 32327	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	Change	Addition
3 year Dir	Elmer Barbree	56 Sam Smith Cir	Crawfordville, FL 32327	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	Change	Addition
Fire Chief	Jenny Dicks	79 Page Oliver Rd	Crawfordville, FL 32327	<input type="checkbox"/>	<input checked="" type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Scott Causey - President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/23/96 925-6126

Daytime Phone #

CR2E037 (12/95)