

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2003 8:00 am
Secretary of State

04-09-2003 90099 029 ****61.25

DOCUMENT # N25789

1. Entity Name

ROYAL VOLUNTEER FIRE DEPARTMENT, INC.



Principal Place of Business

**9641 CR 235
WILDWOOD FL 34785
US**

Mailing Address

**9641 CR 235
WILDWOOD FL 34785
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 **59-2911394**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SOLOMON, LEVI
10101 CR 237
OXFORD FL 34484**

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. I am familiar with, and accept the obligations of registered agent.

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

LEVI SOLOMON (NOTE: Registered Agent signature required when reinstating)

04-05-03 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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **C/D** ☐ Delete
NAME **SOLOMON, LEVI**
STREET ADDRESS **10101 COUNTY RD 237**
CITY-ST-ZIP **OXFORD FL 34484**

TITLE **Don Schnoder** ☐ Change ☒ Addition
NAME **6545 West SR 44**
STREET ADDRESS **Lake Park, FL 33538**
CITY-ST-ZIP

TITLE **T** ☒ Delete
NAME **LEWIS, RON**
STREET ADDRESS **9208 COUNTRY RD 241**
CITY-ST-ZIP **WILDWOOD FL**

TITLE **Sandra Carriel** ☐ Change ☒ Addition
NAME **819 Park Street**
STREET ADDRESS **Wildwood, FL 34785**
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **TAYLOR, FREDRICK**
STREET ADDRESS **9855 NE 17TH PATH**
CITY-ST-ZIP **WILDWOOD FL 34785**

TITLE **Sampson Tanner** ☐ Change ☒ Addition
NAME **9359 County Road 229**
STREET ADDRESS **Wildwood, FL 34785**
CITY-ST-ZIP

TITLE **D/AC** ☐ Delete
NAME **ERVIN, JONATHAN**
STREET ADDRESS **9149 COUNTRY RD 241**
CITY-ST-ZIP **WILDWOOD FL 34785**

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

TITLE **ST** ☒ Delete
NAME **STEELE, BEVERLY**
STREET ADDRESS **CR 231**
CITY-ST-ZIP **WILDWOOD FL 34785**

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

TITLE **D** ☐ Delete
NAME **WILLIAMS, NATHANIEL**
STREET ADDRESS **374 WC 462**
CITY-ST-ZIP **WILDWOOD FL**

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

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: **LEVI SOLOMON** ☒ SIGNATURE REQUIRED

04-05-03 352-748-6787

CR2E037 (10/02)