

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27234

FILED  
Feb 10, 2012  
Secretary of State

**Entity Name:** WETUMPKA VOLUNTEER FIRE DEPARTMENT, INC.

**Current Principal Place of Business:**

25 MCCALL BRIDGE RD  
QUINCY, FL 32351 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1031  
QUINCY, FL 323531031 US

**New Mailing Address:**

**FEI Number:** 59-2910071

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HOSEY, TERRY  
635 DRAKE ACRES ROAD  
QUINCY, FL 32351 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: FC  
Name: HOSEY, TERRY  
Address: 655 DRAKE ACRES RD  
City-St-Zip: QUINCY, FL 32351 US

Title: P  
Name: PARRAMORE, ROBERT R  
Address: 2991 OLD FEDERAL RD  
City-St-Zip: QUINCY, FL 32351 US

Title: S  
Name: HARNAGE, NANCY  
Address: 4798 PAT THOMAS PARKWAY  
City-St-Zip: QUINCY, FL 32351 US

Title: VP  
Name: HAMILTON, GEORGE  
Address: 224 CHINQUAPIN WAY  
City-St-Zip: QUINCY, FL 32351

Title: T  
Name: STODARD, RHONDA B  
Address: 1461 MCCALL BRIDGE ROAD  
City-St-Zip: QUINCY, FL 32351

Title: D  
Name: WHITTLE, W. O  
Address: 394 TALQUIN AVE  
City-St-Zip: QUINCY, FL 32351

I hereby 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 all other like empowered.

**SIGNATURE:** RHONDA STODARD

T

02/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date