FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

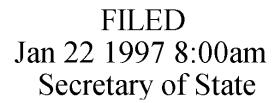
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N30473

(5)

EBRO VOLUNTEER FIRE DEPARTMENT, INC.





Principal Place	e of Business	Mailing Address) KERKIRI BOR ININ DRIK GERNI NGERR NIN RIBIN BERNI DIRIK DIRIK BIRIK BERNI KERN		
POST OFFICE BOX 78 EBRO FL 32437		POST OFFICE BOX 78 EBRO FL 32437-0078						
						3. Date Incorporated or Qualified 02/02/1989	3a. Date of Las 02/19/1	t Report 996
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	<u> </u>	Applied For
21		26			·	NOT APPLICABLE		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1 "	5 Additional
City & State		City & State						Required
23	o	28				Election Campaign Financing Trust Fund Contribution		00 May Be od to Fees
Zip	Country	Zip	Co	untry		8. This corporation has liability for i		
24	25	29	30	•			Yes No	G. 133.00L;
	9. Name and Address of Curre		1-31	T		10. Name and Address of New Re	gistered Agent	
				81	Name			
YOUNG, JERRY				82	Street Add	ress (P.O. Box Number is Not Acceptab	le)	
BOX 140 SUBDIVISION ROAD								
EBRO FL	. 32437		-	83				
				84	City		85 Z	ip Code
					•		FL	
office or r	to the provisions of Sections 617.05 registered agent, or both, in the State im familiar with, and accept the oblic	e of Florida. Such change was	s authorizi	ed by	the corpora	poration submits this statement for the pation's board of directors. I hereby accept	urpose of changin of the appointment	g its registered as registered
ageni. i a SIGNATURE	ım tamıllar with, and accept the oblig	gations or, section 617.0503, I	riunga sia	alules				
SIGNATURE :	Signature, typed or printed name of registered ag				n) signature requ	ired when reinstating)	DATE	
12.	y	ID DIRECTORS	13			ADDITIONS/CHANGES TO OFFIC		
TITLE	FC	☐ DELETE		TITLE	ļ		Chang	je Addition
NAME	YOUNG, JERRY			NAME				
STREET ADDRESS	BOX 140 SUBDIVISION RD				ADDRESS			
CITY-ST-ZIP	EBRO FL	DELETE		CITY - S TITLE	1 - ZIP		Chang	e Addition
THTLE	D CHOOSE BEY	D pereie					Uran	ie 🗀 youridii
NAME Sames Appendix	SUGGS, REX HWY 79 AND HWY 20		- 1	NAME	*DDDCCC			
STREET ADDRESS	EBRO FL				ADDRESS			
CITY+ST-ZIF TITLE	VP	DELETE		CITY-S TITLE	1 - 214		Chang	e Addition
NAME	WILLIAMS, KEITH		- 8	NAME				
STREET ADORESS	CASEY ROAD		- 1		ADDRESS			
CITY-ST-ZIP	EBRO FL			CITY-S				
TITLE	D	DELETE		TITLE	1111		Chan	ge Addition
NAME	SMITH, BRUCE			NAME				
STREET ADDRESS	STAR RT. BOX 25 N/A		- 1		ADDRESS			
City - St - ZiP	EBRO FL			CITY-S				
TITLE	D	DELETE		TITLE			☐ Chan	ge Addition
NAMÉ	YON, JACK		5.2	NAME		10000206	5671	
STREET ADDRESS	TOMS ROAD		5.3	STREET	ADDRESS	-01/23/970103	17009	
CITY - ST - ZIP	EBRO FL		1	CITY-S	ì	***61.25		
TITLE	D	DELETE		TITLE			Chan	ge Addition
NAME	MORRELL, BRIAN		6.2	NAME				
STREET ADDRESS	STRICKLAND ROAD AND LO	OP CIRCLE ROAD	6.3	STREET	ADDRESS			(3)
CITY - ST - ZIP	EBRO FL		6.4	CITY-S	T-ZIP			~ /v

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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: