

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 07, 1999 8:00 am
Secretary of State

04-07-1999 90003 013 ****70.00

DOCUMENT # N31611

1. Corporation Name

MONROE COUNTY FIRE CHIEFS' ASSOCIATION, INC.

Principal Place of Business

~~100 03RD ST.~~
~~035-160~~
MARATHON FL 33050
US

Mailing Address

~~100 03RD~~
~~STE 160~~
MARATHON FL 33050
US



2. Principal Place of Business

21 8900 OVERSEAS HWY

Suite, Apt. #, etc.

22 City & State

23 MARATHON, FL

Zip Country

24 33050 25 USA

2a. Mailing Address

Suite, Apt. #, etc.

27 SAME

City & State

Zip Country

29 30

3. Date Incorporated or Qualified

04/10/1989

4. FEI Number

NOT APPLICABLE

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

9. Name and Address of Current Registered Agent

WAGNER, WILLIAM A. III
8900 OVERSEAS HWY
MARATHON FL 33050

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

[Signature]

WILLIAM WAGNER, III

3/15/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME GALLOWAY, PAUL
STREET ADDRESS 10 ROBERTA STREET
CITY-ST-ZIP KEY WEST FL 33040

TITLE ☒ DELETE
NAME PRES
NAME ROLLI, JOHN
STREET ADDRESS 6 SNAPPER LANE
CITY-ST-ZIP SUGARLOAF KEY FL 33044

TITLE D ☐ DELETE
NAME BURLAY, ROB
STREET ADDRESS 126 PACIFIC AVE
CITY-ST-ZIP TAVERNIER FL 33070

TITLE ☒ DELETE
NAME MEARNS, RANDALL
STREET ADDRESS 118 GULF WINDS LANE
CITY-ST-ZIP MARATHON FL 33050

TITLE ☐ DELETE
NAME STD
NAME WAGNER, WM. A. III
STREET ADDRESS 284 ORANGE AVE
CITY-ST-ZIP MARATHON FL 33050

TITLE D ☒ DELETE
NAME MOBLEY, RON
STREET ADDRESS 23 TARPON AVE
CITY-ST-ZIP KEY LARGO FL 33037

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME DAN CASSEL
1.3 STREET ADDRESS 1427 BOCA CHICA RD.
1.4 CITY-ST-ZIP KEY WEST, FL 33040

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE D ☐ Change ☒ Addition
4.2 NAME MICHAEL H. PUTO
4.3 STREET ADDRESS 700-89 ST, OCEAN
4.4 CITY-ST-ZIP MARATHON, FL 33050

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE D ☐ Change ☒ Addition
6.2 NAME WAYNE FLETHER
6.3 STREET ADDRESS OUTDOOR RESORTS, LOT 368
6.4 CITY-ST-ZIP LONG KEY, FL 33001

14. 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 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, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/99 305.745.3564
Date Daytime Phone #

CR2E037-11/98