

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N32797

FILED
Mar 21, 2005
Secretary of State

Entity Name: SPRING LAKES VOLUNTEER FIREMEN'S FUND, INC.

Current Principal Place of Business:

2800 FIREHOUSE ROAD
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

2800 FIREHOUSE ROAD
DELAND, FL 32720

New Mailing Address:

P.O. BOX 4415
DELAND, FL 327214415

FEI Number: 59-2961948

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEFILS, GREGORY W.
165 SOUTH OAK AVENUE
ORANGE CITY, FL 32763 US

Name and Address of New Registered Agent:

LEFILS, GREGORY W.
161 EAST ROSE AVENUE
ORANGE CITY, FL 32763 US

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: GREGORY W. LEFILS

03/21/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WATTS, ROLAND
Address: 261 EAST C STREET
City-St-Zip: ORANGE CITY, FL 32763

Title: D () Delete
Name: SCOTT, RICHARD D JR.
Address: 1295 20TH STREET
City-St-Zip: ORANGE CITY, FL 321830

Title: D () Delete
Name: HINSCH, HOWARD H
Address: 1010 TORCHWOOD DRIVE
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: PASQUALLE, LYNN
Address: 212 W. RETTA ST
City-St-Zip: DE LEON SPRINGS, FL 32130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: HOWARD H HINSCH

D

03/21/2005

Electronic Signature of Signing Officer or Director

Date