

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37539

FILED
May 15, 2008
Secretary of State

Entity Name: GENOA VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:

8448 SE 137TH BLVD
WHITE SPRINGS, FL 32096

New Principal Place of Business:

Current Mailing Address:

8776 SE 128TH AVE
WHITE SPRINGS, FL 32096 US

New Mailing Address:

FEI Number: 59-3003808 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HUDSON, MARTY
8348 SE 137TH BLVD
JASPER, FL 32052 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: D () Delete
Name: EDMONDS, HOMER L
Address: 14534 SE 87TH TERR
City-St-Zip: WHITE SPRINGS, FL 32096

Title: D () Delete
Name: WETHERINGTON, SAMUEL
Address: 8375 SE 137 BLVD
City-St-Zip: JASPER, FL 32052

Title: D () Delete
Name: HARRIS, JESSIE
Address: 14827 SE 87TH ST.
City-St-Zip: WHITE SPRINGS, FL 32096

Title: T () Delete
Name: HUNTER, BILL
Address: 8776 SE 128TH AVE
City-St-Zip: WHITE SPRINGS, FL 32096

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 exemption stated in Chapter 119, 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: W.H. HUNTER

TREA

05/15/2008

Electronic Signature of Signing Officer or Director

Date