

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N37539

FILED  
Apr 30, 2003  
Secretary of State

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

**Current Principal Place of Business:**

ROUTE 1 BOX 6845  
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 ( )**

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

HUDSON, MARTY  
RT 1 BOX 174 A  
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: D ( ) Delete  
Name: MORGAN, KENNY B.,  
Address: 8707 SE 137TH BLVD  
City-St-Zip: WHITE SPRINGS, FL 32096

Title: T ( ) Delete  
Name: HUNTER BILL,  
Address: 8776 SE 128 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:

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: BILL HUNTER

T

04/30/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date