## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

**NONPROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

**FILED** Aug 19 1997 8:00am Secretary of State

KINGS	POINT VOLUNTEER FIRE	DEPARIMENT, CORP.					
Principal Plac	ce of Business	Mailing Address		· · · <del>-</del>		DI BIHL BIBH BEBH BIRH B	\$   \$
1568 PINE ISLA		1568 PINE ISLAND RD. KISSIMMEE FL 34744-663:	3				
KISSIMMEE FL 34744-6632 KISSIMMEE FL 34744-6632			•		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifier 08/21/1990	3a. Date of L 06/19	
2. Principal P	Place of Business	2a, Mailing Address 26			4, FEI Number 59-3071247		Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<u> </u>		5. Certificate of Status Desired	1 1	75 Additional se Required
City & Stat	te	City & State			Election Campaign Financing     Trust Fund Contribution		.00 May Be ded to Fees
Zip	Country	Zip	Coun	try	8. This corporation owes or has	paid the current ye	ar Intangible
24	25	29	30		Personal Property Tax due Ju	ne 30. 🔲 Yes	□Ño
	g, Name and Address of Cur-	rent Registered Agent			10. Name and Address of New	Registered Agent	
			8	Name /	ETHERNA HAS	- K= ++	
HASKET	T, TODO A.			Street Add	SENEVA HAS ress (P.O. Box Number is Not Accept	inhin)	<del></del> -
1588 PINE ISLAND RD.				156			
	IEE FL 34744		Ē	33			
			8	City K	SSIMMEE	FL 85	Zip Code
11. Pursuant	to the provisions of Sections 617.0	0502 and 617,1508, Florida Statu	ites, the abo	ove-named corp	poration submits this statement for the		ing its registered
office or r	registered agent, or both, in the St	ate of Florida. Such change was	authorized	by the corporal	tion's board of directors. I hereby acc	ept the appointme	nt as registered
		ligations of Contion 617 0509 C	Jorida Clatur	toe	, , , , , , , , , , , , , , , , , , , ,	• • •	_
	1 / Jan. 17 / 1. 1.	ligations of, Section 617.0503, F	Iorida Statul	tes.	poration submits this statement for the tion's board of directors. I hereby according to the statement of the tion's board of directors.	8-10-97	•
agent, I a SIGNATURE	1 / Jan. 17 / 1. 1.	ETT 57.	(SEN	EUA 7	HASKETT	8-10-97	
	Signature, typed or printed name of registered	ETT 57.	(SEN	EUA 7	HASKETT ired when reinstaling)	8-70-77 DATE	
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (NC	(5EW TE: Registered /	EVA - 1	HASKE + T led when reinstating? ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECT	CTORS IN 12
SIGNATURE	Signature, typed or printed name of registered OFFICERS	agent and title if applicable. (NO	(SEW) TE: Registered /	EVA - 1	HASKE + T led when reinstating? ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECT	CTORS IN 12
SIGNATURE .	Signature, typed or printed name of registered OFFICERS A	agent and title if applicable. (NO	13. 1.1 TITU	Agent signature requires File Steet ADDRESS /	HASKETT  Ired when reinstating)  ADDITIONS/CHANGES TO OFF  OHN BYRNE  568 PINE IS/ANG	DATE FICERS AND DIRECT Control  Control	CTORS IN 12
SIGNATURE .  12.  TITLE  NAME	Signature, typed or printed name of registered  OFFICERS A  VP  ADAMS, DONALD  1568 PINE ISLAND RD.	agent and title if applicable. (NO	13. 1.1 TITLI 1.2 NAM 1.3 STRE	Agent signature requires File Steet ADDRESS /	HASKETT  Ired when reinstating)  ADDITIONS/CHANGES TO OFF  OHN BYRNE  568 PINE IS/ANG	DATE FICERS AND DIRECT Control  Control	CTORS IN 12
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SIGNATURE ;  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed flame of registered OFFICERS A  VP ADAMS, DONALD 1568 PINE ISLAND RD. KISSIMMEE FL 34744-6632	egent and title if applicable. (NO	13. 1.1 TITLI 1.2 NAM 1.3 STRE	EUH 7 Agent eignature requil E F IE 7 EET ADDRESS /4 -ST-ZIP K/	HASKETT  Ired when reinstating)  ADDITIONS/CHANGES TO OFF  OHN BYRNE  568 PINE IS/ANG	DATE FICERS AND DIRECTED AND Charles  A Role	CTORS IN 12 Inge Addition
SIGNATURE :  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Signature, typed or printed flame of registered OFFICERS A  VP ADAMS, DONALD 1568 PINE ISLAND RD. KISSIMMEE FL 34744-6632 ST	egent and title if applicable. (NO	13. 1.1 TITL 1.2 NAM 1.3 STR 1.4 CITY 2.1 TITL 2.2 NAM	EUH 7 Agent eignature requil E F IE 7 EET ADDRESS /4 -ST-ZIP K/	HASKETT  Ired when reinstating)  ADDITIONS/CHANGES TO OFF  OHN BYRNE  568 PINE IS/ANG	DATE FICERS AND DIRECTED AND Charles  A Role	CTORS IN 12 Inge Addition
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14. I do hereby certify that the information supplied with this filling 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 Blocky 3 if changed, or on an attachment with an address.