FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jun 11 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT #

N40282

(8)

KEY B	ISCAYNE VOLUNTEER FIR	E DEPARTMENT, INC	· •		 	
Principal Plac	e of Business	Mailing Address	······			THEAR HER MERK MINE OF ALL DIRECT MENT HER TO LOND
128 W. MASHTA DR. KEY BISCAYNE FL 33149		128 W. MASHTA DR. KEY BISCAYNE FL 33149		10/04/1990	3. Date Incorporated or Qualified 10/04/1990 4. FEI Number Applied For	
					65-0778790	Not Applicable
2. Principal P	Place of Business	2a. Mailing Address		<u></u>	5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt. #, etc.		Suile, Apt. #, etc.		6. Election Campaign Financia	····	
22		27		Trust Fund Contribution	Added to Fees	
City & State		City & State		7. Is this nonprofit corporation	n a homeowners association? Yes No	
Zip Country		Zip Country		8. This corporation owes or has paid the corrent year Intargible		
24	25	29	30	,	Personal Property Tax due	
1	9. Name and Address of Curre				10. Name and Address of New	
		·· -	, 1	81 Name		- · - · · - · ·
Brasie, Charles C Chief 128 W. Mashta Dr.			}	B2 Street	Address (P.O. Box Number is Not Acce	aptable)
	CAYNE FL 33149			33		
	• • • • • • • • • • • • • • • • • • • •		-	34 City		85 Zip Code
				1		FL `
office or r agent I a	to the prevision of Sections 617.05 registered agent, or both in the Statum familiar flith, and accept the objinity of the control of the con	VINOCOLV	110	ove named by the cor	d Opporation submits this statement for poration's poard of directors. I hereby a	the purpose of changing its registered accept the appointment as registered
	gn to the or pantod name of registration	·	ATE Regionalied	Agentegnatur	required when reinstalling)	PATE PROTORO ALLO
12. TITLE		ND DIRECTORS DELETE	13. 1.1 Titl	<i>[</i>	ADDITIONS/CHANGES TO C	DEFICERS AND DIRECTORS IN 12 Change Addition
NAME	PD Brasie, Charles C	L. DELETE	1,2 NAM			Change Zooldon
STREET ADDRESS	128 W. MASHTA DR.			EET ADDRESS		
CITY-ST-ZIP	KEY BISCAYNE FL 33149		•	r-st-zip	1	
TITLE	VP0	DELETE	2.1 TITU			Change Addition
NAME	DANSKINE, GRANT H		2.2 NAM	1E		
STREET ADDRESS	442 FERNWOOD RD.		2.3 STR	EET ADDRESS		
CITY-ST-ZIP	KEY BISCAYNE FL 33149		2. 4 CIT	Y-ST-ZIP	<u> </u>	
TITLE	SD ·	☐ DELETE	3.1 TITL	E		Change Addition
NAME	Washburn, Janet A		3.2 NAM	AE .		
STREET ADDRESS	285 SUNRISE DR. #22		3.3 STR	EET ADDRESS		
CITY-ST-ZIP	KEY BISCAYNE FL 33149	- Decre		Y-ST-ZIP	1	
TITLE	TD	☐ DELETE	4.1 TITL		UPTO	Change
NAME	O'NEILL, TIMOTHY		4. 2 NAI		Ĺ	
STREET ADDRESS	745 FERNWOOD RD.			EET ADDRESS		
CATY-ST-ZIP TITLE	KEY BISCAYNE FL 33149	DELETE	4.4 CH1 5.1 TITL	r-ST-ZIP		Change Addition
NAME	HANEY, JIM		5.2 NAN			C onlings C rounton
STREET ADDRESS	472 GLENRIDGE RD.			EET ADDRESS		
CITY-ST-ZIP	KEY BISCAYNE FL 33149			-ST-ZIP	\	!
TITLE	131 510 011115 1 00 170	DELETE	6.1 TITL		D .	Change Z Addition
NAME			6.2 NAM	(E	DAVID WONTH	
STREET ADDRESS	<u>.</u>		6.3 STR	EET ADDRESS	SED ALLEN DULS A	70
CATY-ST-ZHP				- ST - ZIP	DAVID WOKTH 560 ALLBY DALS K KTY BISCAUS Det in Section 119 07(3)(i). Florida Setuti	FL 33149
14. I hereby o	certify that the information eupplied	with this filing does not qualify	for the exer	nption state	ed in Section 119.07(3)(i), Florida Statut gnature shall have the same legal effect s required by Chapter 617, Florida Statu	es. I further certify that the information
officer or	director of the corporation or the re-	eiver or traisles emplowered t	execute th	is report as	required by Chapter 617, Florida Statu	ites; and that my name appears in