

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44148

FILED
Apr 30, 2009
Secretary of State

Entity Name: DELLWOOD VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:

3563 HWY 69
GRAND RIDGE, FL 32442 US

New Principal Place of Business:

Current Mailing Address:

3563 HWY 69
GRAND RIDGE, FL 32442 US

New Mailing Address:

FEI Number: 59-3089074

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERCER, CHRIS W
5881 BLUE SPRINGS RD
GREENWOOD, FL 32443 US

Name and Address of New Registered Agent:

MERCER, CHRIS W
3563 HWY. 69
GRAND RIDGE, FL 32442 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:

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: MERCER, CHRIS W
Address: 5881 BLUE SPRINGS RD
City-St-Zip: GREENWOOD, FL 32443

Title: AC () Delete
Name: MATTHEWS, DARRYL
Address: 6874 MESSER RD.
City-St-Zip: SNEADS, FL 32460

Title: DST () Delete
Name: KELLEY, MARLA L.
Address: 3563 HWY 69
City-St-Zip: GRAND RIDGE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: MERCER, CHRIS W
Address: 3563 HWY. 69
City-St-Zip: GRAND RIDGE, FL 32442

Title: AC (X) Change () Addition
Name: MATTHEWS, DARRYL
Address: 3563 HWY. 69
City-St-Zip: GRAND RIDGE, FL 32442

Title: DST (X) Change () Addition
Name: KELLEY, MARLA L.
Address: 3563 HWY 69
City-St-Zip: GRAND RIDGE, FL 32442

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: MARLA L. KELLEY

DST

04/30/2009

Electronic Signature of Signing Officer or Director

Date