


FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 29 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N48731 (6)**  
1. Corporation Name  
**EAST MILTON VOLUNTEER FIRE DEPARTMENT, INC.**



Principal Place of Business <b>5081 WARD BASIN RD. MILTON FL 32583 US</b>	Mailing Address <b>5081 WARD BASIN RD. MILTON FL 32583-5426 US</b>
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3. Date Incorporated or Qualified <b>05/05/1992</b>	3a. Date of Last Report <b>05/14/1996</b>
4. FEI Number <b>59-3141840</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business <b>21</b> Suite, Apt. #, etc.	2a. Mailing Address <b>26</b> Suite, Apt. #, etc.
City & State <b>23</b>	City & State <b>28</b>
Zip <b>24</b>	Country <b>25</b>
City & State <b>27</b>	City & State <b>30</b>

9. Name and Address of Current Registered Agent  
**MYERS, JIM  
5081 WARD BASIN  
MILTON FL 32583**

10. Name and Address of New Registered Agent <b>81</b> Name <b>Carl Daley</b> <b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>5081 Ward Basin Rd.</b> <b>83</b> <b>84</b> City <b>Milton</b> <b>FL</b> <b>85</b> Zip Code <b>32583</b>
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11. Pursuant to the provisions of Sections 617.0502 and 617.1308, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Carl Daley **Carl Daley, Vice Director** **4/16/97**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>VD</b>	<input checked="" type="checkbox"/> DELETE	1.1 TITLE <b>VD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>LAND, JEFFERY A</b>		1.2 NAME <b>Carl Daley</b>	
STREET ADDRESS <b>5081 WARD BASIN RD.</b>		1.3 STREET ADDRESS <b>5081 Ward Basin Rd.</b>	
CITY-ST-ZIP <b>MILTON FL</b>		1.4 CITY-ST-ZIP <b>Milton, FL 32583</b>	
TITLE <b>VD</b>	<input checked="" type="checkbox"/> DELETE	2.1 TITLE <b>VD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>LAND, WILLIAM R.</b>		2.2 NAME <b>George Lowery</b>	
STREET ADDRESS <b>5081 WARD BASIN RD.</b>		2.3 STREET ADDRESS <b>5081 Ward Basin Rd.</b>	
CITY-ST-ZIP <b>MILTON FL</b>		2.4 CITY-ST-ZIP <b>Milton, FL 32583</b>	
TITLE <b>D</b>	<input checked="" type="checkbox"/> DELETE	3.1 TITLE <b>VD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>FAKTOR, JANICE H.</b>		3.2 NAME <b>Bill Cook</b>	
STREET ADDRESS <b>5081 WARD BASIN RD.</b>		3.3 STREET ADDRESS <b>5081 Ward Basin Rd.</b>	
CITY-ST-ZIP <b>MILTON FL</b>		3.4 CITY-ST-ZIP <b>Milton, FL 32583</b>	
TITLE <b>SD</b>	<input checked="" type="checkbox"/> DELETE	4.1 TITLE <b>SD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>LAND, MARY C</b>		4.2 NAME <b>Wende Parker</b>	
STREET ADDRESS <b>5081 WARD BASIN RD</b>		4.3 STREET ADDRESS <b>5081 Ward Basin Rd.</b>	
CITY-ST-ZIP <b>MILTON FL 32583</b>		4.4 CITY-ST-ZIP <b>Milton, FL 32583</b>	
TITLE <b>TD</b>	<input checked="" type="checkbox"/> DELETE	5.1 TITLE <b>TD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>PANCHENKO, RENEE E</b>		5.2 NAME <b>Juanita Hohenstein</b>	
STREET ADDRESS <b>5081 WARD BASIN RD.</b>		5.3 STREET ADDRESS <b>5081 Ward Basin Rd.</b>	
CITY-ST-ZIP <b>MILTON FL 32583</b>		5.4 CITY-ST-ZIP <b>Milton, FL 32583</b>	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing 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 Block 13 if changed, or on an attachment with an address.

Carl Daley **Carl Daley, VD** **4/16/97** **904-626-0227**

CR2E037 (9/96)