# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Jun 15, 2001 8:00 am**
**Secretary of State**
04-27-2001 90277 006 ****70.00

DOCUMENT # N93000002155

1. Entity Name

LAKE IAMONIA VOLUNTEER FIRE RESCUE, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 3828 FORSYTLE WAY<br>TALLAHASSEE FL 32308<br>US | P.O. BOX 15405<br>TALLAHASSEE FL 32317 |

DO NOT WRITE IN THIS SPACE

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 421 BEAVER Lake Rd | P.O. Box 15405 |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State: Tallahassee FL | City & State: TALLAHASSEE, FL |
| Zip: 32312 Country: LEON | Zip: 32312 Country: USA |

4. FEI Number: 59-3187547 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| LESESNE, FRANK<br>3828 FORSYTLE WAY<br>TALLAHASSEE FL 32308 | Name: PHIL FLOOD<br>Street Address (P.O. Box Number is Not Acceptable): ~~421 BEAVER LAKE RD~~ 421 BEAVER Lake Rd<br>City: TALLAHASSEE FL Zip Code: 32312 |

8. 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: P.F.O. PRESIDENT 4/10/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| FILE NOW: FEE IS $61.25 | 9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees | Make Check Payable to Department of State |
|---|---|---|

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VP<br>GRIFFITH, MARK<br>310 BALL DR.<br>TALLAHASSEE FL 32312 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PRESIDENT D<br>PHIL FLOOD<br>421 BEAVER LAKE RD<br>TALLAHASSEE, FL 32312 | ☑ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>KUERSTEINER, KURT<br>~~2255 TEN OAKS DRIVE~~ 3202 ENTERPRISE<br>TALLAHASSEE FL 32312 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | V.P. PRESIDENT D<br>KURT, KUERSTEINER<br>3202 ENTERPRISE<br>TALLAHASSEE, FL 32312 | ☒ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>BECK, KERI<br>2255 TEN OAKS DR.<br>TALLAHASSEE FL 32312 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SECRETARY<br>~~GREG~~ GAYE FLOOD D<br>421 BEAVER LAKE RD<br>TALLAHASSEE, FL 32312 | ☑ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TD<br>CLARK, SUSAN<br>7828 MACLEAN RD<br>TALLAHASSEE FL 32312 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>LESESNEL, FRANK<br>3828 FORSYTHE WAY<br>TALLAHASSEE FL 32308 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TREASURER<br>HOWARD FLOWERS D<br>3321 GARBER DRIVE<br>TALLY FLA 32303 | ☑ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |

CR2E037 (10/00)

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: P.F.O. PHIL FLOOD 4/10/01 850/497-1202
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #