


2-4-98 BIPD-C  
**FILE NOW: FILING FEE IS \$61.25**

**FILED**  
**Feb 04 1998 8:00am**  
**Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

**DOCUMENT # N93000002769 (8)**  
 1. Corporation Name  
**FLORIDA COALITION OF FIREFIGHTERS/PARAMEDICS, IN C.**

Principal Place of Business 14807 N FLORIDA AVE TAMPA FL 33613 US	Mailing Address 14807 N FLORIDA AVE TAMPA FL 33613 US
--	--

3. Date Incorporated or Qualified  
**06/14/1993**

4. FEI Number  
**65-0446011**

Applied For  
 Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
24 Zip	29 Zip
25 Country	30 Country

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?  
 Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

**COSTELLO, M. G**  
**14807 N. FLORIDA AVE.**  
**TAMPA FL 33613**

10. Name and Address of New Registered Agent

81 Name  
*David G. Costello*

82 Street Address (P.O. Box Number is Not Acceptable)  
*14807 N. Florida Ave.*

83

84 City  
**Tampa** **FL** 85 Zip Code  
**33613**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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: *David G. Costello* DATE: **1-28-98**

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	VD <input checked="" type="checkbox"/> DELETE
NAME	COSTELLO, M.G.
STREET ADDRESS	14807 N. FLORIDA AVE.
CITY-ST-ZIP	TAMPA FL
TITLE	STD <input type="checkbox"/> DELETE
NAME	SETTECASI, FRANK
STREET ADDRESS	14807 N. FLORIDA AVE.
CITY-ST-ZIP	TAMPA FL
TITLE	PD <input type="checkbox"/> DELETE
NAME	SUAREZ, AL N
STREET ADDRESS	14807 N. FLORIDA AVE.
CITY-ST-ZIP	TAMPA FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	David G. Costello
1.3 STREET ADDRESS	14807 N. Florida Ave.
1.4 CITY-ST-ZIP	Tampa, FL 33613
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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.

SIGNATURE: *David G. Costello* DATE: **1-28-98**

CR2E037 (10/97)