

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000593

FILED
Jan 06, 2009
Secretary of State

Entity Name: LAKESHORE VOLUNTEER FIRE DEPARTMENT, INC.

Current Principal Place of Business:

2219 BURPEE DRIVE
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

2219 BURPEE DRIVE
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KNOLL, JOHN A
2219 BURPEE DR
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KNOLL, JOHN A
Address: 2219 BURPEE DRIVE
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: BUTLER, J
Address: SHIRLEY AVENUE 4421
City-St-Zip: JACKSONVILLE, FL 22210

Title: D () Delete
Name: BEATY, DENNIS
Address: 1408 WOLFE ST
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: PISTRO, ROBERT
Address: 2313 BURPEE DR.
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN A. KNOLL

D

01/06/2009

Electronic Signature of Signing Officer or Director

Date