2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED Jan 26, 2004 8:00 am Secretary of State

DOCUMENT # N9400000952 1. Entity Name SPRING RIDGE VOLUNTEER FIRE DEPARTMENT, INC.				01	-26-2004	90060 022	2 ****61.2	!5	
5600 NE COUNTY ROAD 340 560		Mailing Address 5600 NE COUNTY ROAD 34 HIGH SPRINGS, FL 32643	5600 NE COUNTY ROAD 340						
2 Principal Pla	non of Business	3. Mailing Address							
2. Principal Place of Business				I (Maci)tasi otai iotti	ATEN BRIN BRIN B	iaifi kaiti mitti Bati	IB ŞELING OLIŞIB TURJU	TI DI 1001	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01162004 C	hg-NP	CR2E037	7 (10/03)		
City & State		City & State		4. FEI Number 59-32320	 B1			olied For Applicable	
_ Zip	Country	Zip	-Country -	5. Certificate of S	itatus Desired		8.75 Addit	tional	
	6. Name and Address of Current	Registered Agent		7. Name and Ad	dress of New				
KARST ENVIRONMENTAL SERVICES, INC.			Name						
5779 NE COUNTY ROAD 340 HIGH SPRINGS, FL 32643				ress (P.O. Box Number is	s (P.O. Box Number is Not Acceptable)				
HIGH SPK	INGS, FL 32043								
			City			FL	Zip Code		
	named entity submits this statement for ons of registered agent.	r the purpose of changing its reg	istered office or re	gistered agent, or both, i	n the State of	Florida. I am f	amiliar with, a	and accept	
SIGNATURE -	Signature, typed or printed name of registered agent	and title it amplicable. (NOTE: Re				DATE			
		V	Archien What arbustrie	required when reinstating)		DAIL			
	Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campa Trust Fund Con	ign Financing	\$5.00 May Be	F	Make check lorida Depart			
10.	Due by May 1, 2004 OFFICERS AND DI	9. Election Campa Trust Fund Con	uign Financing tribution.	\$5.00 May Be Added to Fees ADDITIONS/CHANG	10多数以上	Maka check lorida Depart	RECTORS IN	ate 10	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2004	9. Election Campa Trust Fund Con	tribution. 11. TITLE NAME STREET ADDRESS	\$5.00 May Be Added to Fees	lace	Maka check lorida Depart	ment of St	ate	
TITLE NAME STREET ADORESS	OFFICERS AND DI PD SCHALTENBRAND, LEE 5589 NE 56 ST	9. Election Campa Trust Fund Con	ign Financing tribution. 11. TITLE NAME I STREET ADDRESS CITY-ST-ZIP ITITLE NAME SERVET ADDRESS CETTER ADDRESS CETTE	\$5.00 May Be Added to Fees ADDITIONS/CHANG PD Mills, Ronald 5319 NE 54 P1	GES TO OFFICE Lace F1. Lee	Make check lorida Depart CERS AND DIF	RECTORS IN	ate 10	
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12. I hereby certify that the information subplied 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 cath; that I am an officer or director of the corporation or the receiver or further 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:

Ronald L. Mills

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/23/04

352-463-3198

Date

Daytime Phone #