

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000001544

**FILED**  
**Jan 30, 2012**  
**Secretary of State**

**Entity Name:** INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS, LOCAL 2157, GAINESVILLE  
PROFESSIONAL FIREFIGHTERS, INC.

**Current Principal Place of Business:**

1220 NE 8TH AVENUE  
GAINESVILLE, FL 32602 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 983  
GAINESVILLE, FL 32602 US

**New Mailing Address:**

1220 NE 8TH AVENUE  
GAINESVILLE, FL 32602 US

**FEI Number:** 51-0197260

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BOALS, MARK T  
1220 NE 8TH AVENUE  
GAINESVILLE, FL 32601 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: VD  
Name: TAYLOR, CHARLES R JR  
Address: 4270 BLUEBERRY ST.  
City-St-Zip: MIDDLEBURG, FL 32068

Title: PD  
Name: HIGDON, TRACEY D  
Address: 13116 NW 142ND TERR  
City-St-Zip: ALACHUA, FL 32615

Title: STD  
Name: BOALS, MARK T  
Address: 8801 SW 85TH PLACE  
City-St-Zip: GAINESVILLE, FL 32608

I hereby 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 all other like empowered.

SIGNATURE: MARK BOALS

ST

01/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date