FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT #

N9400002170 (8)

WEST SIDE FIRE DEPARTMENT INC.

Principal Plac	ce of Business	Mailing Address			r kodinion dia 10111 afèti 40111 abili	BATTI BATTE BATTA 11881 150	<u> </u>
407 67TH ST W BRADENTON FL 34209		407 67TH ST W BRADENTON FL 34209-2307					
					3. Date Incorporated or Qualified 04/28/1994	3a. Date of Last 05/01/1	
⊢ .	Place of Business	2a. Mailing Address			4. FEI Number	F	Applied For
21 Cuita Am	ш	26			65-0534648		Not Applicable
Suite, Apt. #. etc.		Suite, Apt. #, etc.]		5. Certificate of Status Desired		
City & Stat	te	City & State		1	6. Election Campaign Financing		D May Be
23 Zip	Country	28	Country		Trust Fund Contribution	· · · · · · · · · · · · · · · · · · ·	to Fees
24	25	29	30		 This corporation has liability for Florida Statutes 	intangible tax under ☐ Yes No	s. 199.032,
27	9. Name and Address of Curr		[30]	1	D. Name and Address of New Re		
			81 Nar				
SCHNACK, DENNIS M			82 Stre	Name MAGRO, SALVATORE C 82 Street Address (P.O. Box Number is Not Acceptable)			
	TH ST W			612	I AVE WEST	леј	
BRADE	NTON FL 34209		83				
			84 City	BRA	DENTON		Code
11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above-named cornoration 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 School C Mogro SALVATORE C MAGRO 1/9/97 Signature typed or printed name of registered grent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		RS IN 12
TITLE	PD	⋈ DELETE	1.1 TITLE	SD		☐ Change	Addition
NAME	BECK, ALLEN		1.2 NAME	BEG	ck, GLEN		-
STREET ADDRESS	5711 2ND AVE DR NW		1.3 STREET ADDRE	SS 571	I 2ND AVE DR NO	w.	
CITY - ST - ZIP	BRADENTON FL 34209		1.4 CITY-ST-ZIP	BRA	DENTON FL 34.	209	
TITLE	VD	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	HAAS, TIM		2.2 NAME				
STREET ADDRESS	407 67TH ST W		2.3 STREET ADDRE	SS			
CITY-ST-ZIP	BRADENTON FL 34209	N DELETE	2. 4 CITY - ST - ZIP				
TITLE	TD SOUNDARY DEADING AS	≥ DELETE	3.1 TITLE	TO	GRO, SALVATORE	Change	Addition
NAME	SCHNACK, DENNIS M		3.2 NAME	1111	2 I AVE WEST		
STREET ADDRESS	926 82ND ST NW BRADENTON FL 34209		3.3 STREET ADDRE	.00	DENTON FL 34204	2	
CITY-ST-ZIP TITLE	SD SD	DELETE	3.4. CITY-ST-ZIP		DERIVIT PL 3420	Change	Addition
NAME	BECHT, BOB		4.7 IIILE 4.2 NAME	PD		DE CHARGE	L.J ADDITION
STREET ADDRESS	407 67TH ST W		4.2 NAME 4.3 STREET ADDRE	·cc			
CITY-ST-ZIP	BRADENTON FL 34209			:33			
TITLE	DIVIDENTOTTE 01200	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE			Change	Addition
NAME			5.2 NAME			Same and the	
STREET ADDRESS			5.3 STREET ADDRE	ss			
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				•
STREET ADORESS			6.3 STREET ADDRE	SS			
CITY-ST-ZIP			64 CITY-ST-ZIP				,

14. I do 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.

Salut C Migro SAGWATORE C. MAGRO 19/97 941-795-7814

IGNATURE AND TYPED OR PRINTED NAME OF SENING OFFICER OR DIRECTOR

Date Dayline Proce * 0061890

FILED

Jan 22 1997 8:00am

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Secretary of State