

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000003433

1. Entity Name

POLK COUNTY FIRE DEPARTMENT AUXILIARY STATION 410

Principal Place of Business

200 COMMONWEALTH AVE  
POLK CITY FL 33868

Mailing Address

P O BOX 872  
POK CITY FL 33968

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3251285

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCPHERSON, GUY  
200 COMMONWEALTH AVE  
POLK CITY FL 33868

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Delete  
NAME CLARK, CRYSTAL  
STREET ADDRESS 631 TAVARES ROAD  
CITY-ST-ZIP POLK CITY FL

TITLE IP D ☐ Change ☒ Addition  
NAME CLARK, CRYSTAL  
STREET ADDRESS 631 TAVARES RD  
CITY-ST-ZIP Polk City, Florida 33868

TITLE P ☒ Delete  
NAME CLARK, CRYSTAL  
STREET ADDRESS 631 TAVARES ROAD  
CITY-ST-ZIP POL CITY FL

TITLE V D ☐ Change ☒ Addition  
NAME CLARK, JAMES  
STREET ADDRESS 631 TAVARES RD  
CITY-ST-ZIP Polk City, Florida 33868

TITLE ST ☒ Delete  
NAME MCPHERSON, GUY  
STREET ADDRESS 230 CARTER BLVD  
CITY-ST-ZIP POLK CITY FL

TITLE ST D ☐ Change ☒ Addition  
NAME McPherson, Guy F  
STREET ADDRESS P O Box 1125  
CITY-ST-ZIP Polk City, Florida 33868

TITLE VPD ☒ Delete  
NAME KESLER, JASON  
STREET ADDRESS MOORE RD P O BOX 872  
CITY-ST-ZIP POLK CITY FL 33868

TITLE D ☐ Change ☒ Addition  
NAME Keith Rowland  
STREET ADDRESS 4541 Country Trails  
CITY-ST-ZIP Polk City, Florida 33868

TITLE D ☒ Delete  
NAME MCPHERSON, GUY F  
STREET ADDRESS P O BOX 1125  
CITY-ST-ZIP POLK CITY FL 33868

TITLE TIM Pemberton D ☐ Change ☒ Addition  
NAME 10379 RACHEL CHERRY DR  
STREET ADDRESS Polk City, Florida 33868

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *GUY F MCPHERSON* SIGNATURE REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-00  
Date

863-984-1571  
Daytime Phone #

CR2E037 (9/99)