FILED

## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UÉR)

## Jul 22, 2003 8:00 am **Secretary of State** DOCUMENT # **N9400005372** 07-22-2003 90049 017 \*\*\*\*61.25 THE HIGHLANDS VOLUNTEER FIRE DEPARTMENT, INC. Principal Place of Business Mailing Address 4333 S. LITTLE AL PT 4333 S. LITTLE AL PT INVERNESS FL 34452 INVERNESS FL 34452 2. Principal Place of Business 3. Mailing Address THE CHECK HERE IF MAKING CHANGES Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number 59-3274953 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CALANDRA, MICHAEL Street Address (P.O. Box Number is Not Acceptable) 4333 S. LITTLE AL PT **INVERNESS FL 34452** City 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. I am familiar with, and accept the obligations of registered agent, SIGNATURE MICHAEL MICHAEL CALANDRA (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be After September 10, 2003, min will be \$236.25 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE. ☐ Delete TITLE ☐ Addition CALANDRA, MICHAEL NAME NAME STREET ADDRESS 912 E. HARVARD ST STREET ADDRESS CITY-ST-ZIP **INVERNESS FL 34452** CITY-ST-ZIP Delete TITLE TITLE ☐ Change **Addition** DITTEMER, CHARLES VEHRICHOFF, NICK NAME 4089 S. IVANHOE TERR. STREET ADDRESS 3553\_S. DALTON TERR STREET ADDRESS CITY-ST-ZIP **INVERNESS FL 34452** CITY-ST-ZIP INVERNESS FL, 34452 TITLE 🔀 Delete Change Addition TITLE ROBERTS, FRANKLIN, M HAUFLER, CHAD NAME NAME 4791 E. STALLION 9358 TUMBERLINE TERR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **INVERNESS FL 34452** INVERNESS FL, 34452 TITLE Delete TITLE Change ☐ Addition JENSEN, DOUG NAME NAME STREET ADDRESS 6387 E. ANNAJO DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **INVERNESS FL 34452** TITLE Delete TITLE ☐ Change ☐ Addition THOMAS, DAVID NAME NAME STREFT ADDRESS 6146 E. SENECAST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **INVERNESS FL 34452** TITLE ☐ Delete TITI F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.

MECHAEL CALANDRA JULY 12,2003