

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 29, 2004 8:00 am**  
**Secretary of State**

01-29-2004 90025 027 \*\*\*\*61.25

**DOCUMENT # N95000005552**

1. Entity Name

**FIRE DISTRICT 5 VOLUNTEER ASSOCIATION, INC.**



Principal Place of Business

**346 JASMINE ROAD  
ST. AUGUSTINE FL 32086  
US**

Mailing Address

**346 JASMINE ROAD  
ST AUGUSTINE FL 32086  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-3351253**

Applied For

Not Applicable

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

**WEBBER, JOHN JERROLD  
1033 PRINCE RD  
ST. AUGUSTINE FL 32086**

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. I am familiar with, and accept the obligations of registered agent.

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  
Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME LENINAN, EDWARD ☐ Delete  
STREET ADDRESS 525 JEFFREY DRIVE  
CITY-ST-ZIP ST. AUGUSTINE FL 32086

TITLE D  
NAME JACKSON, THOMAS ☐ Delete  
STREET ADDRESS 134 PELICAN RD  
CITY-ST-ZIP SAINT AUGUSTINE FL 32086

TITLE D  
NAME WEBBER, JOHN J ☐ Delete  
STREET ADDRESS 1033 PRINCE RD  
CITY-ST-ZIP ST AUGUSTINE FL

TITLE TD  
NAME O'KEEFE, AUGUSTINE ☐ Delete  
STREET ADDRESS 346 JASMINE ROAD  
CITY-ST-ZIP ST. AUGUSTINE FL 32086

TITLE VPD  
NAME WRIGHT, CLIFF ☐ Delete  
STREET ADDRESS 3281 TURTLE CREEK RD.  
CITY-ST-ZIP SAINT AUGUSTINE FL 32086

TITLE S  
NAME O'KEE FE, EDITH ☐ Delete  
STREET ADDRESS 346 JASMINE ROAD  
CITY-ST-ZIP SAINT AUGUSTINE FL 32086

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition  
NAME LENINAN EDWARD  
STREET ADDRESS 525 JEFFREY DRIVE  
CITY-ST-ZIP ST. AUGUSTINE, FL 32086

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

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

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
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TITLE ☐ Change ☐ Addition  
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:** *Augustine O'Keefe* **Augustine O'Keefe, Treas. 1/21/04 904-794-1890**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #